

# Indiana Head Start



**2003 - 2004  
Annual  
Statistical  
Report**



  
**8th Edition**



This publication contains data compiled from the  
Program Information Reports  
submitted by  
Head Start and Early Head Start  
programs across Indiana (except Texas Migrant)  
to the Department of Health and Human Services/ACF  
for the  
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**Throughout this data book, unless otherwise specified, the term Head Start is used to encompass both Head Start and Early Head Start.**

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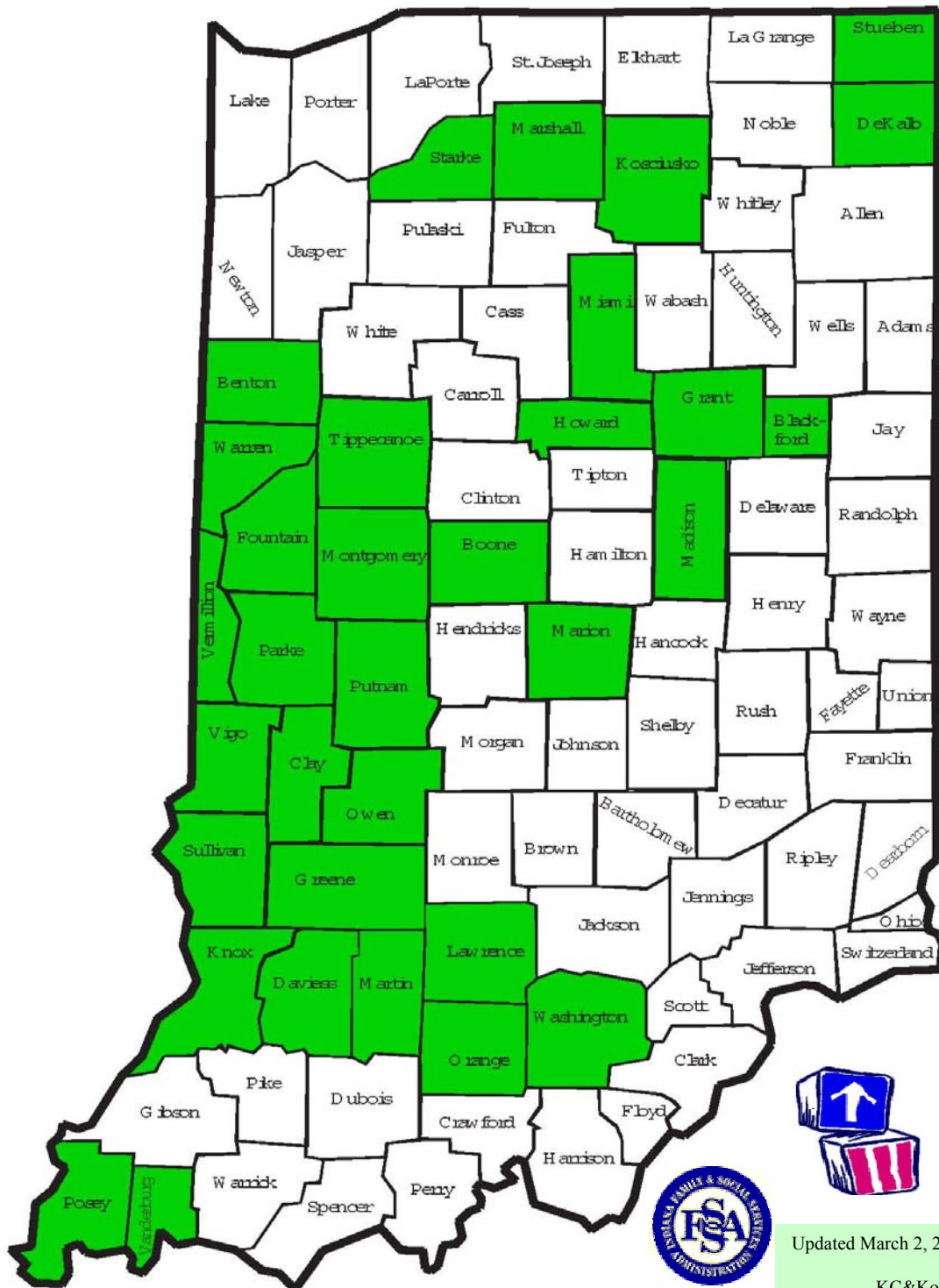
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<b>Central Office</b>	<b>Grantee</b>	<b>County(ies) Served:</b>
ANDERSON	Urban League HS	Madison
ANDERSON	Hopewell EHS	Madison
AURORA	Southeastern Indiana EOC	Dearborn, Franklin, Ohio, Ripley, Switzerland
BLOOMINGTON	SCCAP Head Start	Monroe
COLUMBUS	Human Services, Inc.	Bartholomew, Brown, Decatur, Jackson, Johnson, Shelby
CONNERSVILLE	Fayette County Head Start	Fayette
COVINGTON	CAP Inc. of Western Indiana HS & EHS	Benton, Boone, Fountain, Montgomery, Parke, Vermillion, Warren
EVANSVILLE	CAP of Evansville HS & EHS	Gibson, Posey, Vanderburgh
FORT WAYNE	CANI Head Start	Allen, Noble, Whitley
FORT WAYNE	East Wayne Head Start	Allen, Fort Wayne (NE)
FRANKFORT	Area IV Head Start	Carroll, Clinton, White
FREMONT	Vistula Head Start	LaGrange, Steuben
GARRETT	Garrett-Keyser-Butler HS & EHS	DeKalb
GARY	Lake Ridge Schools HS	Lake
GREENCASTLE	CARS HS & EHS	Clay, Hendricks, Morgan, Owen, Putnam
HAMMOND	School City of Hammond	Lake (Hammond)
INDIANAPOLIS	Family Dev. Services HS & EHS	Marion, Hamilton
JASPER	Tri-CAP Head Start	Dubois, Pike, Warrick
JEFFERSONVILLE	Community Action SI	Clark
KOKOMO	Kokomo Center School Corp. HS	Howard, Miami, Tipton
KOKOMO	Bona Vista EHS	Howard, Miami
KOKOMO	Texas Migrant Head Start	15 counties, statewide
LAFAYETTE	Com. & Family Resource Center	Tippecanoe
LIBERTY	Community Care Head Start	Union
LOGANSPOUT	Area Five Agency	Wabash, Fulton, Cass
MADISON	OVO Project Head Start	Jefferson, Jennings, Scott
MARION	Marion Community Schools HS	Grant
MARION	Carey Services, Inc. EHS	Grant, Blackford
MERRILLVILLE	Geminus	Lake, Porter
MICHIGAN CITY	COSC	LaPorte
MITCHELL	Hoosier Uplands EDC HS & EHS	Lawrence, Martin, Orange, Washington
MONON	K-IRPC	Newton, Jasper, Pulaski
MUNCIE	Action, Inc. Head Start	Delaware
NEW ALBANY	Floyd County Head Start	Floyd
NEW CASTLE	ICAP Head Start	Hancock, Henry, Rush
PLYMOUTH	Marshall-Starke HS & EHS	Marshall, Starke
PORTLAND	Comm. & Family Services	Adams, Blackford, Huntington, Jay, Randolph, Wells
RICHMOND	CAECI/Head Start	Wayne
SOUTH BEND	Head Start Consortium of Elkhart & St. Joseph Counties	Elkhart, St. Joseph
TELL CITY	Lincoln Hills Development Corp.	Crawford, Harrison, Perry, Spencer
TERRE HAUTE	Western Indiana Community	Vigo
TERRE HAUTE	Hamilton Center	Vigo
VINCENNES	Wabash Valley HS & EHS	Daviess, Greene, Knox, Sullivan
WARSAW	Kosciusko Co. Head Start	Kosciusko

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# Counties with Early Head Start





# Head Start Overview





## Head Start in Indiana

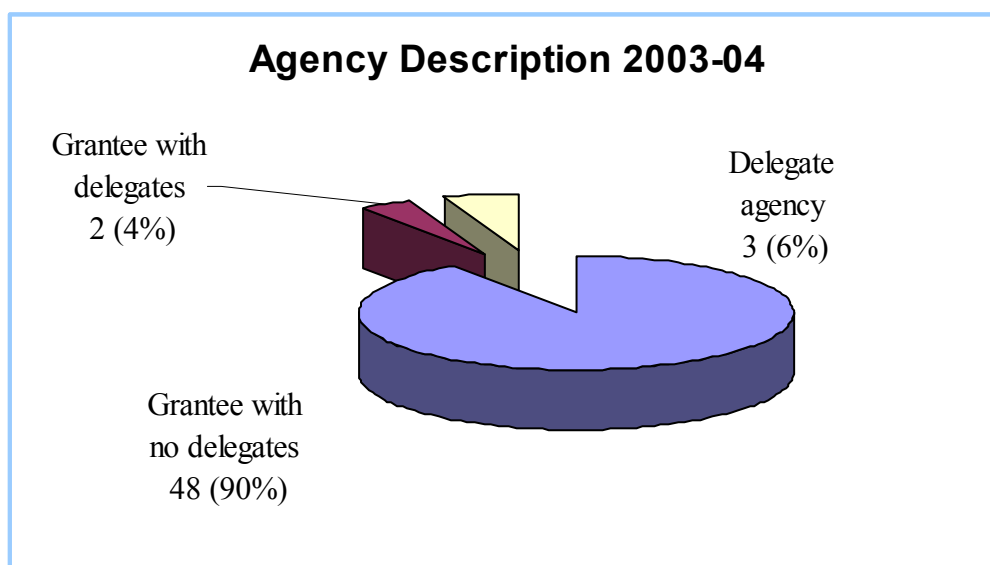
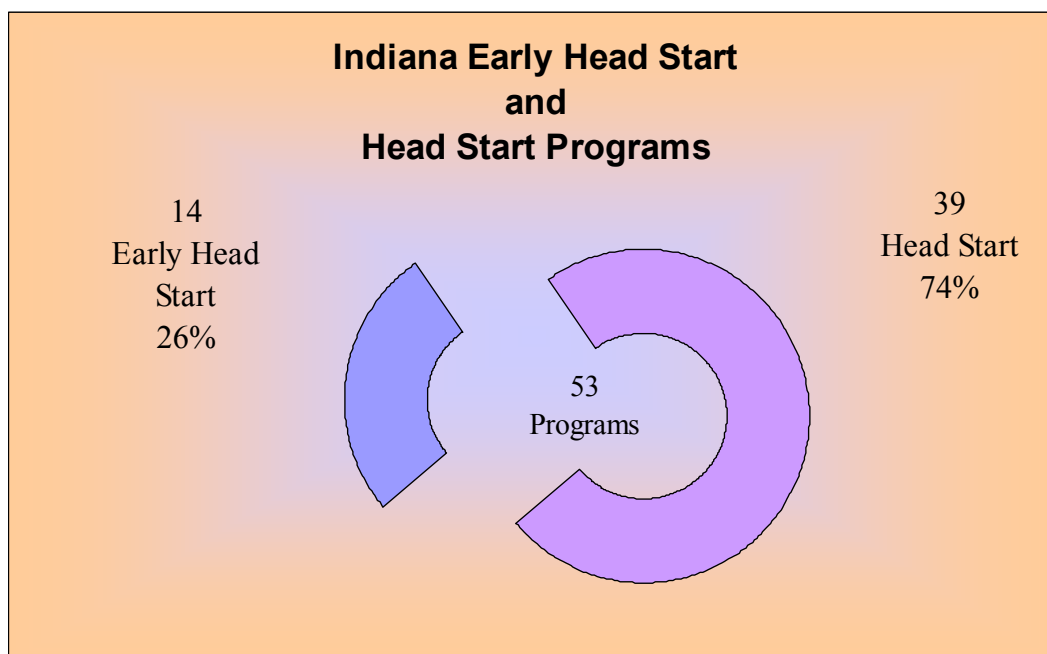
In 1965, President Johnson announced a new program known as "*The War on Poverty*." Head Start is one of the few remaining "War on Poverty" programs that continue. Federal funding from the Department of Health and Human Services, Administration for Children and Families has enabled Head Start programs to provide comprehensive services for low-income Hoosier children and their families for over 39 years. Head Start programs serve children ages three through five years old. In 1994 federal legislation was passed to establish Early Head Start services for pregnant women, infant and toddlers (birth to three). Both Early Head Start (EHS) and Head Start (HS) programs provide early childhood education, social, medical, dental, nutrition, and mental health services to the enrolled children and their families.

The Head Start philosophy is based on three key elements:

- **Comprehensive child development services.** The HS goal of social competence for children is supported through the delivery of a comprehensive/interdisciplinary approach. Health services and family community partnerships further support the child's development.
- **Parent involvement.** Head Start supports and encourages parents to become involved in all aspects of shared governance in policy and program decisions that respond to their interests and needs. Additionally, Head Start programs work in close partnership with parents and other family members to develop and utilize their strengths in order to successfully achieve family and personal goals.
- **Community partnerships and community-based services.** The specific local models of service provision flow out of the characteristics of different communities based on annually conducted needs assessments. To fulfill program and community goals, Head Start programs work to build linkages with other service providers and leaders in the community.

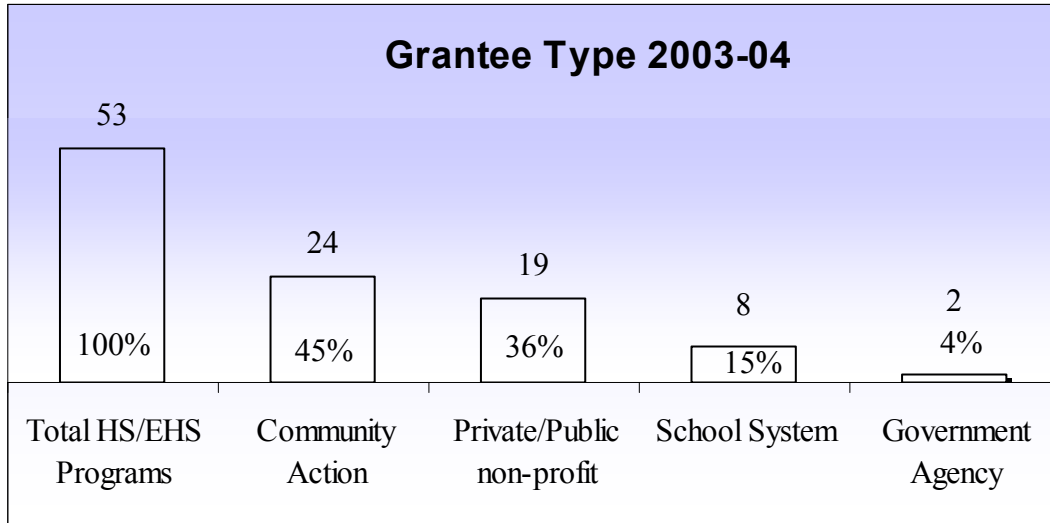
## Programs - General Profile

During 2003-2004, fifty-three federally funded Early Head Start and Head Start grantees and delegates operated in the state: thirty-nine Head Start programs and fourteen Early Head Start programs. Forty-eight Grantees directly operated programs, and two Grantees directly operated programs along with three are delegate agencies. The Head Start programs serve all 92 Indiana counties while Early Head Start programs serve 30 counties.



## Program Grantees

The EHS and HS program grantees were categorized as: 24 community action agencies, 8 school systems, 19 private/public non-profit agencies, and 2 single purpose stand alone agencies.



Contracted grantees of local programs receive direct federal assistance. Program administrators work in conjunction with and report to the Region V Administration of Children and Families office in Chicago, Illinois.

The 2003-2004 funding of \$93,523,057 was designated for Head Start and Early Head Start program services. Funding was provided to serve infants, toddlers and preschoolers in 750 classrooms located in 304 centers throughout the state. This constituted an increase of 6 classrooms and decrease of 12 centers from 2002-03.

Programs were funded for 14,133; and actually served 17,296 children and pregnant women. Head Start program relationships with state governmental agencies normally include:

- Licensing through the Bureau of Child Development
- Child Care Food Program through the Department of Education
- Commercial Driver's licensing through the Bureau of Motor Vehicles
- Criminal History Record checks and bus inspection through the State Police
- Provide immunization statistics to the Indiana State Department of Health
- The Indiana Head Start Partnership (IHSP) office continually introduces state agency services and programs to EHS/HS programs.

**Indiana Head Start at A Glance****Program Year 2003-2004**

Total Funding (EHS-\$7,886,662 and HS-\$82,362,814)	\$93,523,057
Locally generated In-kind and/or Non-federal Match	\$23,380,764
Total Programs Reporting (14 EHS + 39 HS)	53
Total Administration for Children, Youth and Families (ACYF) Funded	14,097
Total Children Actually Served (15,685 HS + 1,376 EHS)	17,061
Total Pregnant Women Actually Served	235
Pregnant Women Under 18 Years of Age Actually Served	68
Total Families Actually Served	15,826
Families Receiving TANF (24% of families served)	3,844
Families Receiving Supplemental Security Income (8% of families served)	1,324
Number of HS/EHS Children per Family (in 2003 – 1.1 per family)	1.08
Children Enrolled in Hoosier Healthwise/Medicaid (85% of children served)	14,528
Children with a Disability (17% of children served)	2,911
Classrooms Operated Directly by HS and EHS	750
Number of HS and EHS Centers	304
Total Staff (3,055 EHS & HS, 124 Contracted)	3,179

**Program Eligibility**

Eligibility to receive Head Start services is based on federal poverty guidelines:

Size of Family Unit	Poverty Guidelines*	
	2002-2003	2003-2004*
1	\$8,980	\$9,310
2	12,120	12,490
3	15,260	15,670
4	18,400	18,850
5	21,540	22,030
6	24,680	25,210
7	27,820	28,390
8	30,960	31,570

\*Source: [http://www.headstartinfo.org/publications/im04/im04\\_03a.htm](http://www.headstartinfo.org/publications/im04/im04_03a.htm)

## **Federal Quality and Performance Standards for Programs**

Programs provide a comprehensive and interactive service for low-income families and their children aged birth to five. During the 1970's federally legislated Program Performance Standards firmly established the basic elements of the Head Start model. These Standards provided universal definitions in terms of conditions constituting quality services for the over 2,000 community-based Head Start organizations nationwide. In 1993, standards for children with disabilities were established to consolidate, clarify, and update policies that had existed for the programs.

As part of a focus on Head Start quality, Program Performance Standard revisions were enacted on January 1, 1998. The revision integrated standards for Early Head Start services to pregnant women and children birth to three and established early learning outcomes for Head Start children. The revised Performance Standards cover the following three major areas in which Head Start programs must provide services:

- Early Childhood Development and Health Services;
- Family and Community Partnerships and
- Program Design and Management

The Performance Standards serve a variety of purposes: a) provision of standardized definitions regarding quality Head Start services; b) act as training guides for staff and parents on major quality elements, and c) provide a regulating structure for monitoring and assurance of quality Head Start services.

Currently there are over 1,800 Federal Standards established for EHS & HS programs. The data book includes the three major Performance Standard areas. Each section includes some of the major federal standards and 2003-04 PIR data from Indiana HS and EHS programs.





# Section I

**Early Childhood Development  
And  
Health Services**

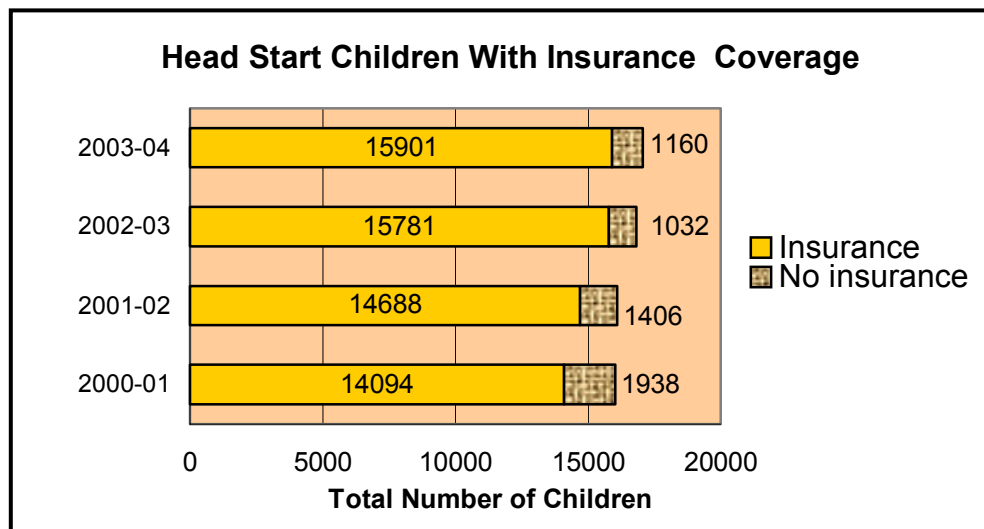




## Child Health and Developmental Services – Major Federal Standards for Programs

- Ensure each child has a “medical home,” i.e. an ongoing source of continuous accessible health care.
- Ensure all developmental, sensory, and behavioral screenings are completed in order to secure early identification of children with disabilities.
- Support ongoing health assessment and treatment for children by observing and recording children’s developmental progress, changes in appearance or behavior and then consulting with parents.
- Use the information from assessments to individualize the program for all children, with special attention given to appropriate programming for children with disabilities.

To promote healthy development every child needs a source of continuous accessible health care that is available even after the child leaves Head Start. Since early identification and treatment for health problems reduces complications and improves health outcomes, it is important that each child visits a health care provider on a schedule of preventive and primary health care to quickly identify and address potential health risks. Because parents have the primary, long-term responsibility for their children’s health, Head Start programs support parental involvement in this health care process. Ninety-three percent of the children served in 2003-04 had health insurance. This percentage was consistent with the 2002-03 program year.



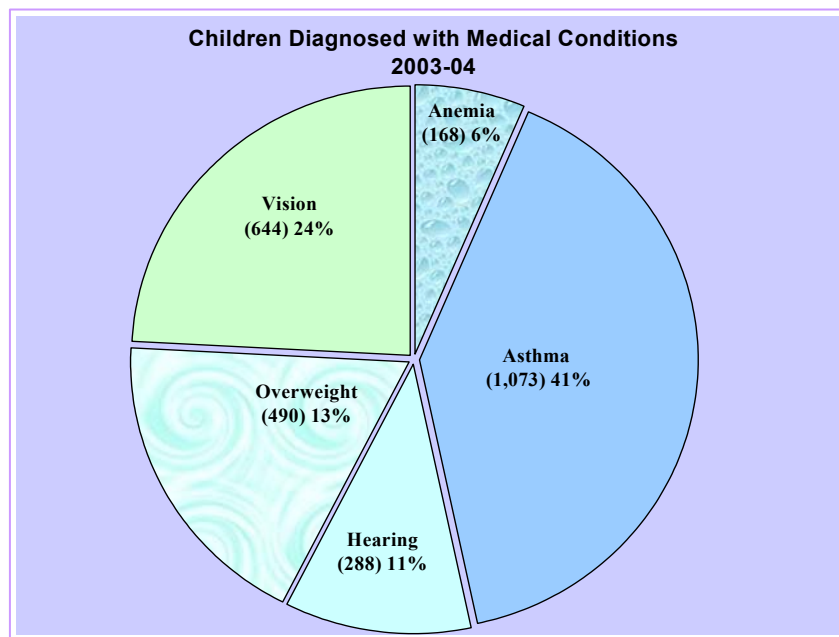
**Early Head Start/Head Start - Child Health Insurance Data\*****1999 to 2004**

<b>Number of Children</b>	<b>1999-00</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2002-03</b>	<b>2003-04</b>
ACF funded enrollment	12,990	13,274	13,826	14,105	14,097
Actually served	13,052	15,432	16,094	17,036	17,061
With health insurance	13,052	14,094	14,688	15,781	15,901
Percentage of served	100%	91%	91%	93%	93%
In Medicaid/EPSTD**	6,153	5,722	5,185	5,571	4,959
Percent with insurance	47%	37%	32%	33%	29%
In CHIP**	4,900	6,328	5,342	5,789	4,771
Percent with insurance	37%	41%	33%	34%	30%
In State-only program**	na	na	121	112	573
Percent with insurance			1%	1%	4%
In private health insurance	1,817	1,925	1,777	1,689	1,359
Percent with insurance	14%	12%	11%	10%	9%
With other coverage	182	119	4	16	14
Percent with insurance	2%	<1%	<1%	<1%	<1%
Without health insurance coverage	0	1,938	1,406	1,032	1,160
Percentage served		13%	9%	6%	7%

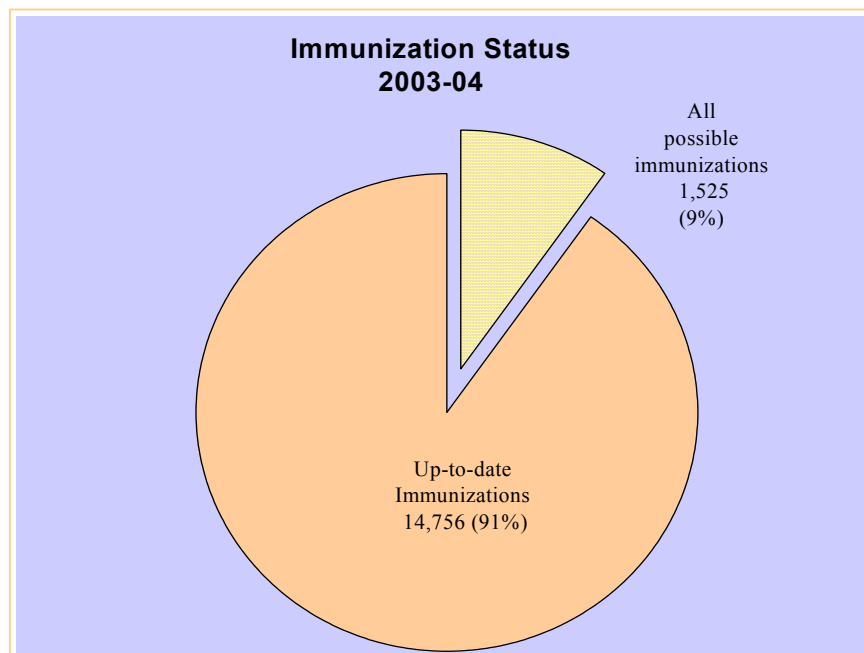
\* This data is based on the Program Information Review submitted annually by all Early Head/Head Start Programs as required by the DHHS/ACF.

\*\*CHIP, Medicaid, and State Programs are Hoosier Healthwise in Indiana. Hoosier Healthwise is a health insurance program for children, pregnant women, and low income families. Health care is free or low cost to Indiana families enrolled in the program. The enrolled member chooses a doctor to get regular checkups and health care for illnesses. Other health needs such as prescriptions, dental care, vision care, family planning services, and mental health services are also available as part of the Hoosier Healthwise program.

**Medical Services** – Medical screenings of 13,956 children (82% of all children served) resulted in 2,493 identified as needing medical treatment. Ninety-two percent of the children needing treatment received the necessary care. Fewer children were screened in 2003-04 than 2002-03.



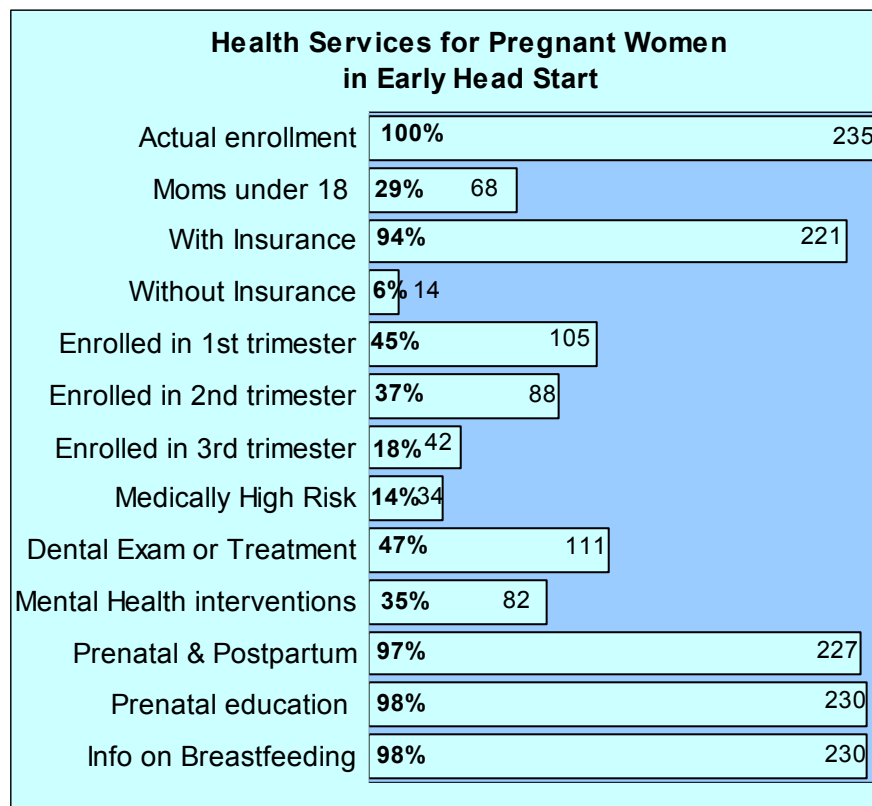
**Immunizations** – 14,756 (86%) children were current with immunizations while 1,525 (9%) children received all possible immunizations for full immunization.



**Health Services for Pregnant Women in Early Head Start** - To ensure that a child gets off to a good start; Early Head Start emphasizes prenatal care of the mother-to-be. Early and regular care during pregnancy affords the child the extra nourishment and protection that can be an important factor in a healthy arrival into the world. This care also allows the new parent(s) to learn about the changes that will take place in the home and to realize there are resources available for support and consultation.

Between reporting period 2003 and 2004, the number of pregnant mothers without health insurance nearly doubled while the increase in mothers under the age of 18 increased to 29% compared to 24% in 2002-03.

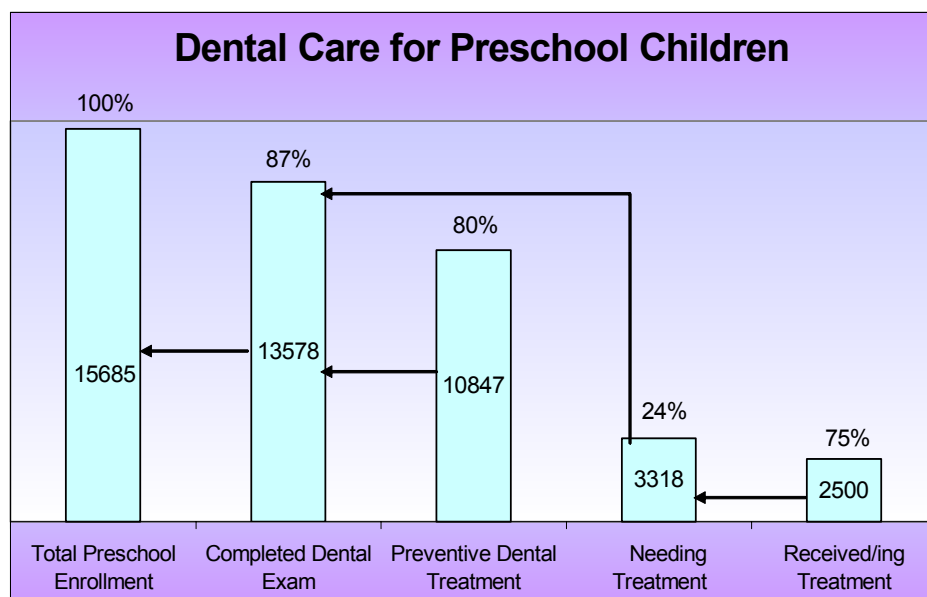
Out of the 235 pregnant women enrolled in EHS, 45% enrolled during the 1<sup>st</sup> trimester of her pregnancy, 37% enrolled during her 2<sup>nd</sup> trimester and 18% in her 3<sup>rd</sup> trimester. Fourteen percent of the pregnancies were determined medically “High Risk.” Overall healthiness including mental, physical, and dental care is essential to the wellness of the pregnant woman and gives the child a head start to a healthy life.



**Dental Services** - Research demonstrates that continuous, accessible dental care during early stages of child development fosters good oral hygiene that children learn and practice into adulthood. In 2003-04, 14,105 Head Start children had a “dental home” involving a long term monitoring relationship with a dentist.

During that year, 13,578 preschool children received professional dental exams; of which 10,847 received preventive care. Within this population, 3,318 children needed dental care and 2,500 received or were in the process of receiving treatment by the end of the year.

Preventive dental screenings of 748 of the 1,376 EHS children were completed during well-baby examinations. Professional dental exams were provided to 397 children in this age group.



Pregnant women enrolled in Early Head Start also received dental care. An oral exam and/or treatment were provided to 111 of the 235 enrolled. See the chart on page 9. Dental care for pregnant women affects the health and teeth of the child. A significant increase in the numbers of pregnant women receiving dental examinations and/or treatment occurred during 2003-04 compared to 2002-03.

## **Child Health and Safety – Major Federal Standards for Programs**

The following standards for child health, safety, and nutrition were designed to ensure the program's management system supports the appropriate implementation procedures.

- Establish and implement policies and procedures to respond to medical and dental health emergencies.
- Ensure rules regarding temporary exclusion of a child with short-term injury or acute or short-term contagious illness are followed; ensure program participation is not excluded over the long-term solely based on health care needs or medication requirements unless keeping the child poses a significant risk which cannot be reduced to an acceptable level.
- Establish and maintain written procedures regarding the administration, handling, and storage of medications.
- Follow good hygiene and sanitation practices using universal precautions.

## **Child Nutrition – Major Federal Standards for Programs**

- Identify nutritional specifications for each child and plan meals with those special dietary needs incorporated into the menu schedule.
- Ensure the quantities and kinds of foods served meet the recommended serving sizes and nutrient standard as required by USDA.
- Assist child in developing good hygiene and sanitation practices, including washing hands with soap and water before mealtime.
- Ensure staff uses proper food handling and storage procedures when serving snacks and food.
- Assist families with nutritional and food preparation skills to continue good food health at home.



## Child Mental Health – Major Federal Standards for Programs

- Work collaboratively with parents to identify mental health concerns and support their participation in any interventions.
- Organize a regular schedule for on-site mental health consultation to promote children's mental health wellness and to provide assistance for those with identified mental health needs.
- Secure services of mental health professionals for timely and effective identification and intervention in family and staff concerns about a child's mental health.

Head Start programs are required to secure the diagnostic services of mental health professionals. The average number of hours per operating month mental health professional spent on site increased to 59.10 hours in 2003-04 up from 37.88 of previous year. This supports the growing staff concern regarding behavior management of children.

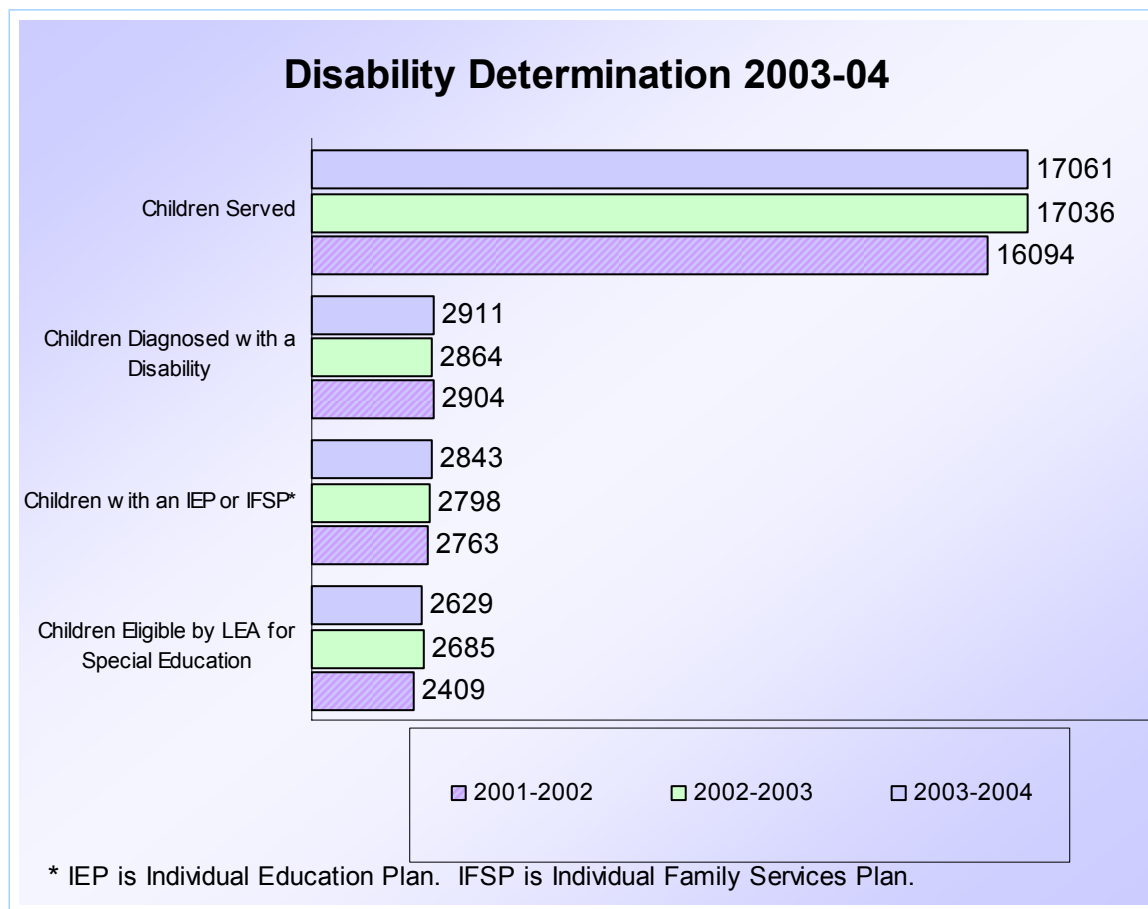
Mental Health Services - 2002-2004		
Services provided by Mental Health Professional	Number of Children receiving services	
	2002-03	2003-04
MH professional consulted with program staff concerning behavior	2,509	2,809
Mental Health professional consulted with parent/guardian concerning behavior	1,037	1,200
MH professional provided individual mental health assessment	931	1,941
MH professional facilitated a referral for mental health services	714	807
MH referrals for services to outside program	669	623

## Disability Services

Percent of Children Professionally Diagnosed with Disabilities 1995-2004										
Year	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Percent	19	19	19	22	18	28	19	18	17	17

Federal legislation mandates Early Head Start / Head Start Programs reserve ten percent of funded slots for children with disabilities. Over the last ten years, the average percentage has been eighteen percent of the total population served each year.

During 2003-04, 2,911 children were diagnosed with a disability. Of the children diagnosed as needing treatment, 43 did not receive it. The number of Local Education Agencies (LEA)/Part C agencies with whom Programs worked was 210. Early Head Start and/or Head Start had formal agreements with 167 of these LEA/PartC Agencies.



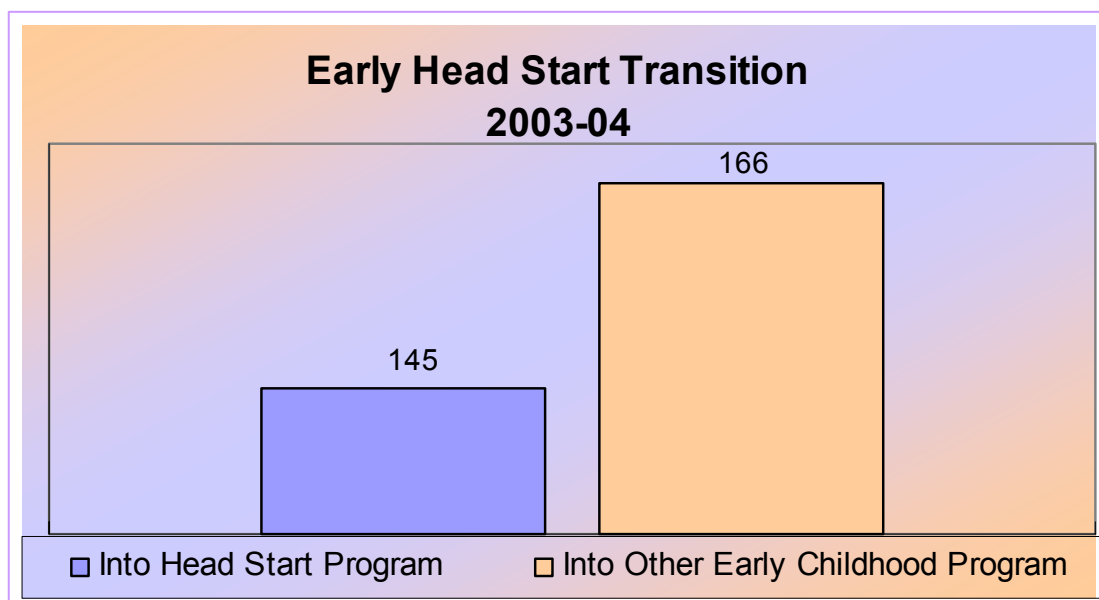
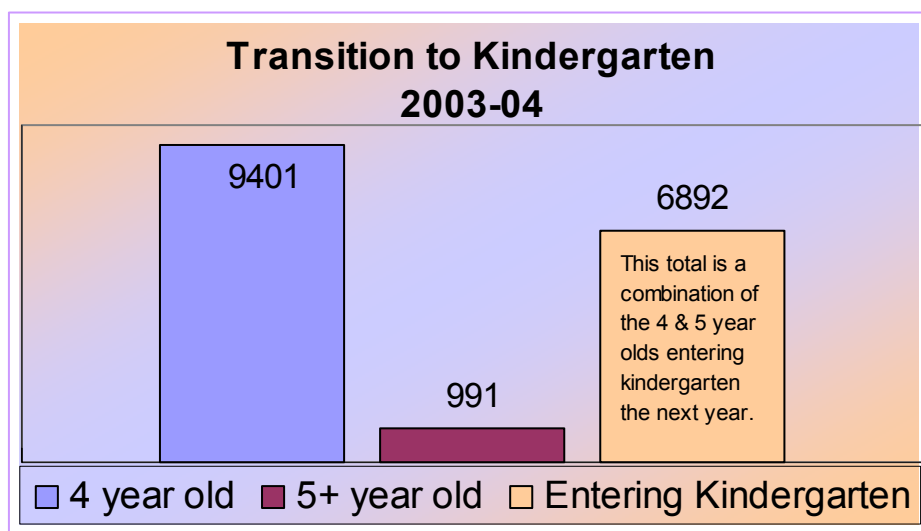
In 2003-04, speech or language impairments constituted the major number of diagnosed disabilities. Non-categorical/developmental delay was the second most often diagnosed disability.

<b>Preschool Children with Diagnosed Disability 2003 – 2004</b>		
<b>Actual Number of Preschool Age Children (3-5 years old)</b>		<b>15,685</b>
	<b>Diagnosed</b>	<b>Received Services</b>
Total Number of Children with Disabilities	2,911	2,868
Speech or Language Impairments	1,969	1,955
Non-Categorical/Developmental Delay	275	266
Emotional/Behavioral Disorder	121	117
Multiple Disabilities Including Deaf-Blind	81	81
Mental Retardation	75	72
Health Impairment	33	29
Autism	31	30
Learning Disabilities	23	22
Hearing Impairment Including Deafness	11	11
Orthopedic Impairment	10	10
Traumatic Brain Injury	6	5
Visual Impairment Including Blindness	4	4
<b>EHS Only Children receiving services under Part C of IDEA</b>		<b>266</b>

**Transition** – The critical period when the child and family transfer from one learning environment to another can be unsettling. The Head Start and Early Head Start programs make every effort of making the change into the next level of the learning as smooth as possible.

Head Start programs work with 265 school districts in the state. The programs have formal agreements with 155 of these districts in order to coordinate transitional services for children and families.

6,892 Head Start children were expected to enter kindergarten in the following 2004-05 school year

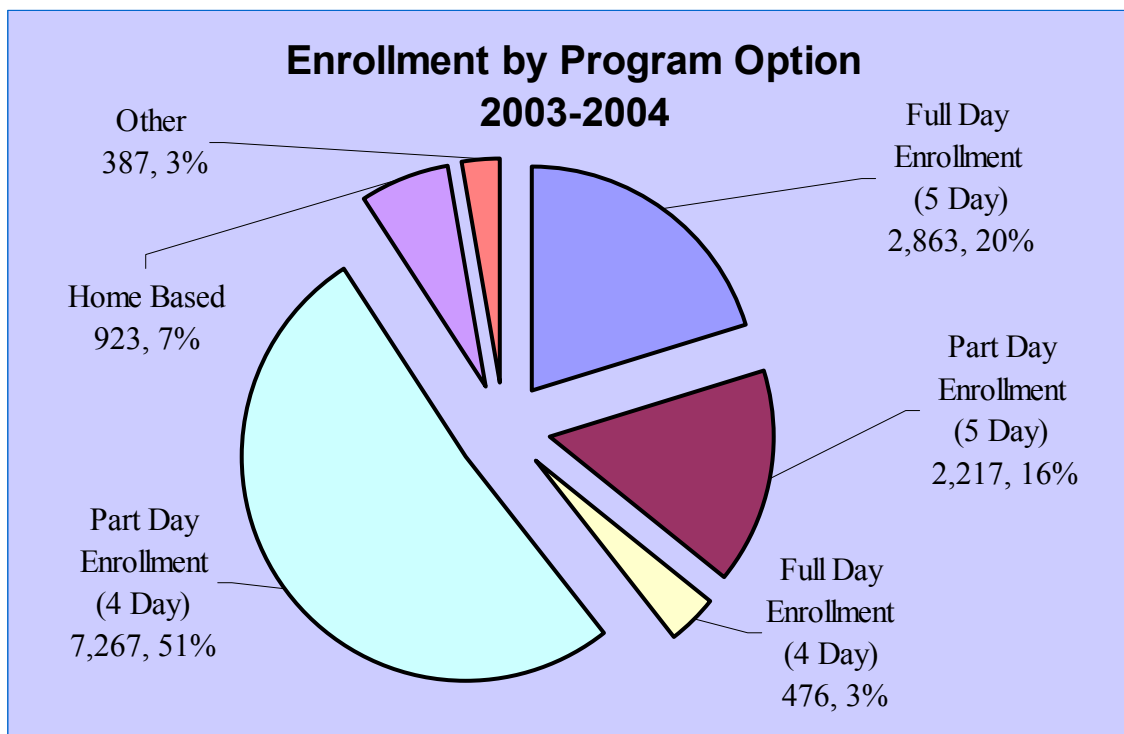


## **Education and Early Childhood Development- Major Federal Standards for Programs**

- Ensure a developmentally and linguistically appropriate learning environment, recognizing children's individual rates of development as well as interest, temperaments, cultural backgrounds, and learning styles.
- Ensure developmentally supportive learning environment for each child in social and emotional, cognitive, language skills, and physical skills areas.
- Provide services for infants and toddlers which encourage development of a secure relationship between child and teacher which is supportive of the child's social, emotional, and physical development.
- Implement a curriculum that individualizes experiences, integrates the educational aspects of all program areas, helps to develop children's social relationships, enhances each child's understanding of self, and provides for development of the whole child.
- Involve parents in the program's curriculum and approach to child development and education, in staff-parent conferences and home visits. Ensure parents have opportunities to observe their children and to share their assessments with staff to plan individualized learning experiences.
- Support age appropriate literacy and numeral development for children with intriguing materials and encouraging activities.
- Ensure each child gains an understanding of self as an individual and a member of a group.

## Funded Enrollment Data

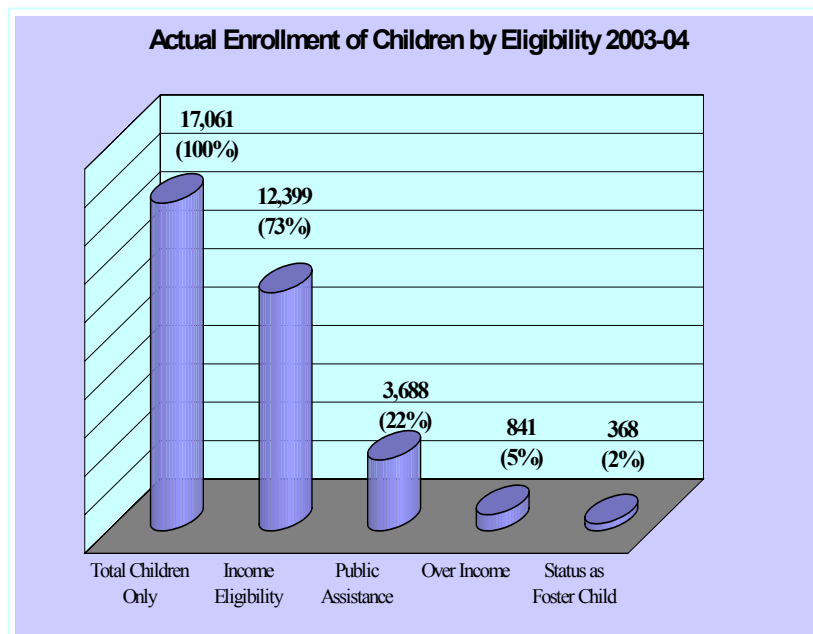
- Total funded enrollment, including all funding sources - 14,133.
- ACYF/IHSS funded enrollment - 14,097.
- Total funded EHS pregnant women - 96.



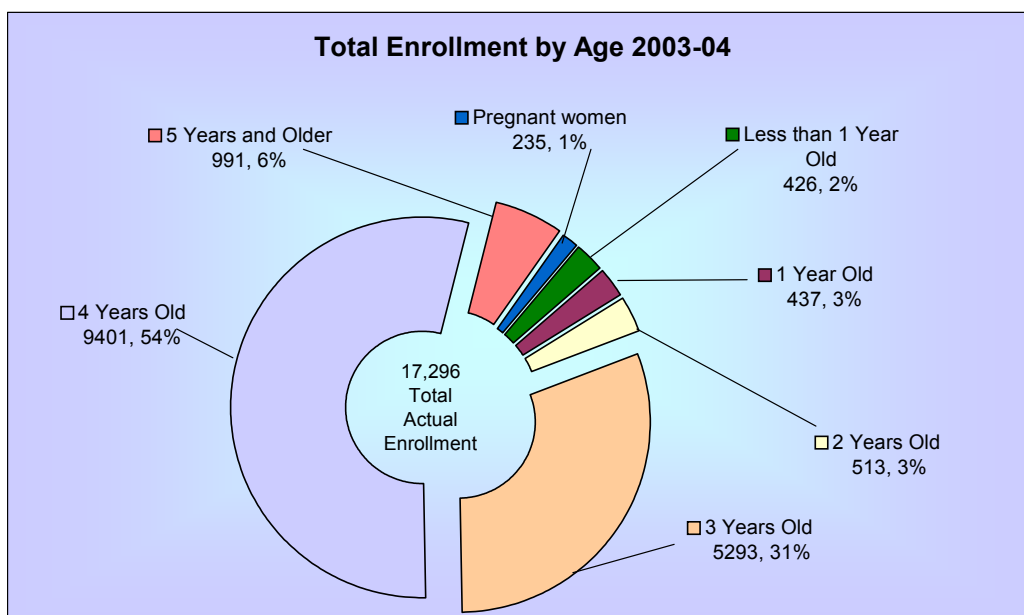
## Actual Enrollment Data

- 750 classes operated and housed in 304 centers and 104 home-based socialization sessions. There was a slight reduction in the number of centers as well as socialization groups compared to 2002-03.
- Actual total children served were 17,061.
- Actual number of pregnant women served was 235.
- Children needing full-year and/or full-day child care were 7,086.
- Children who received child care subsidy was 1,303. There were 1,487 children in 2002-03 who received subsidy.

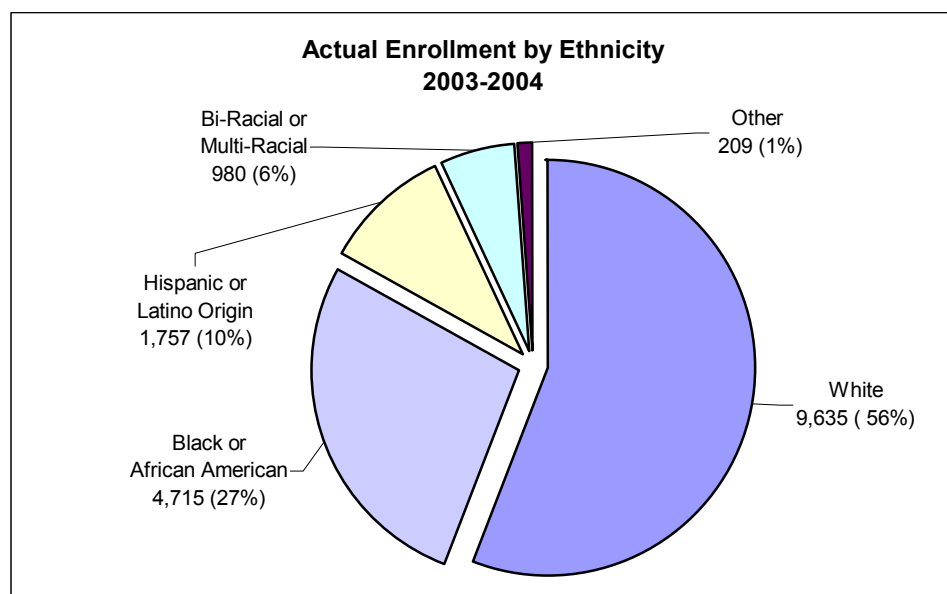
**Eligibility** - 73% of the enrollment was based on children from families at or below 100% of the federal poverty line with 22% based on receipt of public assistance, 5% were over-income, and 2% were enrolled due to status as a foster child.



**Age** – 4 year-old children constituted 54% of the total actual enrollment and 3 year-old children the second largest group (31%). This was a 1% and 2% increase, respectively, compared to last year. Five year-olds decreased 4%.



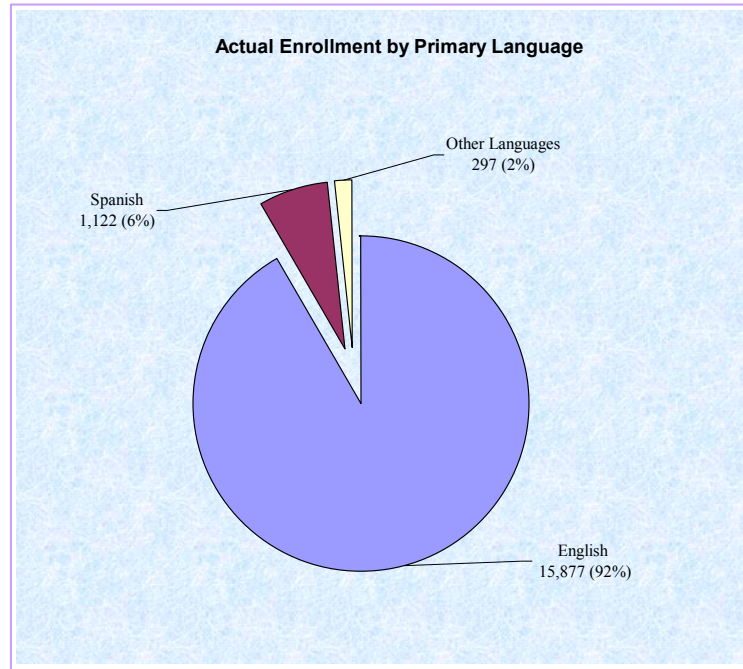
**Ethnicity** – There was a 1% decrease in Black enrollment and 1% decrease in the Bi-Racial enrollment in 2003-04 from last year. The “Other” ethnic category remained consistent at 1% of the enrollment.



Actual Enrollment by Ethnicity 1999 - 2004						
	1999-00	2000-01	2001-02	2002-03	2003-04	% Shift
American Indian/ Alaskan Native	30	32	38	39	27	0%
Asian	90	96	92	100	79	0%
Bi-Racial or Multi-Racial	na	na	562	802	980	1%
Black/African American	4811	4738	4669	4808	4715	-1%
Hispanic/Latin American	1054	1266	1482	1654	1757	0%
Native Hawaiian	4	19	31	17	14	0%
Other	na	na	16	11	6	0%
Unspecified	na	na	67	24	83	0%
White	9165	9265	9316	9581	9635	1%
Total Population	15154	15416	16273	17036	17296	0%



**Language** - English was the primary language for 92% of the actual enrollment. Spanish was the second language (6%) spoken as a primary language. There was a slight decrease in English speakers over the past five years. The percentage of Spanish speakers remained consistent from last year.



Actual Enrollment by Primary Language 1999 - 2004					
	1999-00	2000-01	2001-02	2002-03	2003-04
English	14,378	14,771	15,064	15,639	15,877
Spanish	690	871	977	1,048	1,122
Other	39	46	97	143	138
Far Eastern Asian	47	60	38	50	42
African	NA	NA	36	16	13
Asian	NA	NA	31	36	31
European and Slavic	NA	NA	13	17	5
Native Central American, South American and Mexican	NA	NA	10	81	66
Pacific Island	NA	NA	4	2	0
Caribbean	NA	NA	2	3	2
Native American	0	1	1	1	0
<b>Total Enrollment</b>	<b>15,154</b>	<b>15,749</b>	<b>16,273</b>	<b>17,036</b>	<b>17,296</b>

The last five years of data has shown an increased number of Spanish speaking families. The chart below lists the Head Start programs where at least five percent of the families speak Spanish as their primary language. Eighteen of the fifty-three reporting programs have five percent or more of the families speaking Spanish.

Spanish as Primary Language of Family at Home 2003-04						
Agency Name	City	Actual Enrollment	English	Spanish	% English	% Spanish
Kosciusko County EHS	Warsaw	56	30	26	54%	46%
Area IV Agency On Aging & Com. Action Program HS	Frankfort	146	86	58	59%	40%
Kosciusko County Head Start	Warsaw	158	118	40	75%	25%
Community And Family Resource Center, Inc. HS	Lafayette	296	227	66	77%	22%
Vistula Head Start	Fremont	209	167	42	80%	20%
Community Action of Northeast Indiana, Inc. HS	Fort Wayne	843	704	130	84%	15%
Area Five Agency On Aging And Com. Services HS	Logansport	255	218	36	85%	14%
CDI Head Start (Elkhart & St. Joseph Counties, IN) HS	South Bend	1,075	921	145	86%	13%
Community Action of Southern Indiana HS	Jeffersonville	357	312	41	87%	11%
Hopewell Center, Inc. EHS	Anderson	141	126	15	89%	11%
Family Development Services, Inc. HS	Indianapolis	2,229	1,992	227	89%	10%
Dubois-Pike-Warrick EOC, DBA: Tri-Cap Head Start	Jasper	218	201	17	92%	8%
Marshall-Starke Development Center, Inc. HS	Plymouth	215	199	16	93%	7%
City of Hammond Schools HS	Hammond	297	219	22	74%	7%
Community And Family Resource Center, Inc. EHS	Lafayette	130	121	9	93%	7%
Community Action of East Central Indiana HS	Richmond	352	330	22	94%	6%
East Wayne Head Start	Fort Wayne	135	118	8	87%	6%
Human Services, Inc. HS	Columbus	475	450	25	95%	5%
Community Action Program of Evansville EHS	Evansville	162	153	8	94%	5%
Geminus Corporation HS	Merrillville	1,185	1,040	56	88%	5%

## **Funded Program Options**

**Center Based Option:** 12,823 children were in a center classroom compared to 12,717 in 2002-03.

- 20% of funded children were in a center based option providing full day services (6 hours or more a day) for five days a week. This was a decline of 2% from 2002-03.
- 16% of the children were in a center based option that provided part day services for five days a week. This was a slight increase over 2002-03.
- 3% of children receiving 6 hours or more a day service for 4 days a week decreased slightly from the previous year. Part day services (less than 6 hours a day for 4 days a week) increased from 49% to 51%. Of these children, 71% were enrolled in double sessions. Double sessions involve programming for two separate groups served in one room; one attends a morning session and another attends an afternoon session.

**Home Based Option:** Services are provided primarily in the child's home through intensive work with the child's family.

- 7% of all children were enrolled in this option compared to 6% last year.

**Combination Option:** Services are provided by a center and at the child's home.

- 2% of all children received care at home and at a center.

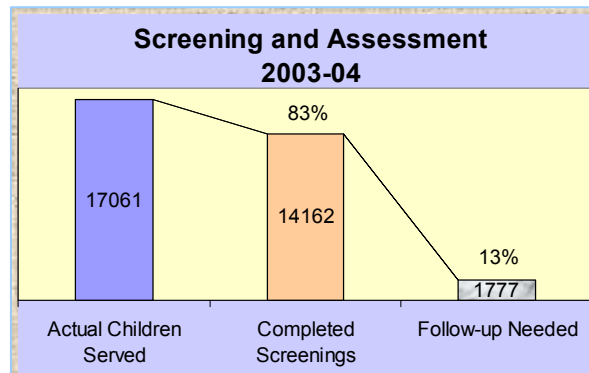
**Locally Designed Option:** A determination on the special designed program is planned as the result of a community assessment of needs.

- 1% of the children were enrolled in a locally designed program.

**Center Based Program Full Day Full Year:** 2,725 children enrolled in HS/EHS program options received eight or more hours of service per day.

City	Name of Center	Early Head Start / Head Start	Center Based Full Day 5 Days Week		Total Funded Enrollment
			Children	Days	
FRANKFORT	Area IV Agency on Aging & Community Action Program	Head Start	34	260	150
LAFA YETTE	Community & Family Resource Center, Inc.	Early Head Start	40	251	57
COVINGTON	Community Action Program Inc. of Western Indiana	Head Start	17	250	317
EVANSVILLE	Community Action Program Evansville	Early Head Start	42	250	116
TERRE HAUTE	Hamilton Center, Inc.	Early Head Start	20	250	75
BLOOMINGTON	South Central Community Action Program Head Start	Head Start	128	249	235
MARION	Carey Services	Head Start	24	248	140
FORT WAYNE	Community Action of Northeast Indiana, Inc	Head Start	94	240	703
FREMONT	Vistula Head Start	Head Start	20	240	187
GARRETT	Garrett-Keyser-Butler Family Development Services	Head Start	19	237	140
INDIANAPOLIS	Early Head Start	Early Head Start	66	236	66
WARSAW	Kosciusko County Head Start / Cardinal Center	Early Head Start	8	236	40
KOKOMO	Bona Vista Programs, Inc.	Early Head Start	32	235	80
MERRILLVILLE	Geminus HS XXI Grantee Office	Head Start	200	235	1319
MITCHELL	Hoosier Uplands EDC	Head Start	68	235	287
LIBERTY	Community Care in Union County, Inc.	Head Start	17	225	77
VINCENNES	Wabash Valley Human Services	Early Head Start	16	225	49
VINCENNES	Wabash Valley Human Services	Head Start	40	225	388
WARSAW	Kosciusko County Head Start / Cardinal Center	Head Start	35	225	135
JASPER	Tri-Cap Head Start	Head Start	66	220	193
LAFA YETTE	Community and Family Resource Center, Inc.	Head Start	62	220	237
MUNCIE	Head Start Action Inc. of Delaware County	Head Start	17	218	257
AURORA	SIEOC Head Start	Head Start	30	214	294
PORTLAND	Community & Family Services, Inc.	Head Start	17	214	314
MICHIGAN CITY	Community Organization of Social Concern Head Start	Head Start	34	213	311
GREENCASTLE	Child-Adult Resource Services, Inc.	Head Start	48	210	415
MADISON	Ohio Valley Opportunities, Inc.	Head Start	54	202	246
JEFFERSONVILLE	Community Action of Southern Indiana	Head Start	60	193	290
COLUMBUS	Human Services, Inc.	Head Start	91	187	382
CONNERSVILLE	Fayette County School Corporation	Head Start	16	185	162
NEW ALBANY	Floyd County Community Action Agency	Head Start	19	175	276
EVANSVILLE	Community Action Program Evansville	Head Start	113	169	586
NEW CASTLE	Interlocal Community Action Program, Inc.	Head Start	15	169	270
PLYMOUTH	Marshall-Starke Development Center, Inc.	Head Start	35	169	182
INDIANAPOLIS	Family Development Services, Inc.	Head Start	1025	166	1931
KOKOMO	Kokomo Center School Corporation	Head Start	68	161	250
TELL CITY	Lincoln Hills Dev. Corp.	Head Start	17	160	269
SOUTH BEND	St. Joseph Head Start Consortium	Head Start	156	122	944
Total			2863	214 average annual days	

**Curriculum, Screening and Assessment** – Eighty-three percent (14,162) of the enrolled children completed screenings for developmental, sensory and behavioral needs of which 13% needed a follow-up assessment or formal evaluation. The following chart lists some of the assessment tool EHS/HS used in 2003-04.



	Curriculum Model	Developmental Screening Tool	Ongoing Child Assessment Tool
Early Head	Hawaii Early Learning Profile (HELP)	Denver II	HELP (Hawaii Early Learning Profile)
	Creative Curriculum (Infant & Toddler)	Ages & Stages Questionnaire	Summary of Development
	Parents as Teachers		Creative Curriculum (Infant & Toddler)
	Locally Designed		Portage
	High Reach, High Reach Framework		Galileo Online
	Organic Self-developed		Ounce Scale
			ASQ/DIAL
			Self-developed child goals form
Head Start	Creative Curriculum	Denver II	Galileo
	Thematic Unit Curriculum	Brigance Preschool Screen	Creative Curriculum
	Letter People	Early Screening Inventory-Revised	PTC
	High Reach	Pre-K Success	Brigance
	Modified High Scope	Carolina Developmental Profile	Work Sampling
	Hawaii Early Learning Profile	Speed Dial	Anecdotal / Observations
		Locally Designed	Hawaii Early Learning Profile
			Learning Accomplishment Profile Diagnostic (LAP-D)
			Outcome goals COSC kids/Kaplan
			Social Emotional Checklist
			Outcomes Based Assessment
			Authentic Assessment
			National Reporting System
			Portfolios
			Deveroux

**Child Care** – 7,086 HS and EHS children needed full-year and/or full-day child care because the parents were working or in job training. HS and EHS programs were able to provide the care for 45% of those children. Children received care from combinations of family, centers, and public schools.

Child Care Services 2003-04		
Type of Care	Total Children	Children Needing Care Full-Year/ Full-Day
	17,061	7,086
HS and EHS		3182
Family Child Care Home		673
Child Care Center/Classroom		953
Home (related or unrelated)		3,486
Public School Pre-Kindergarten		290

# Section II

## **Family and Community Partnership**







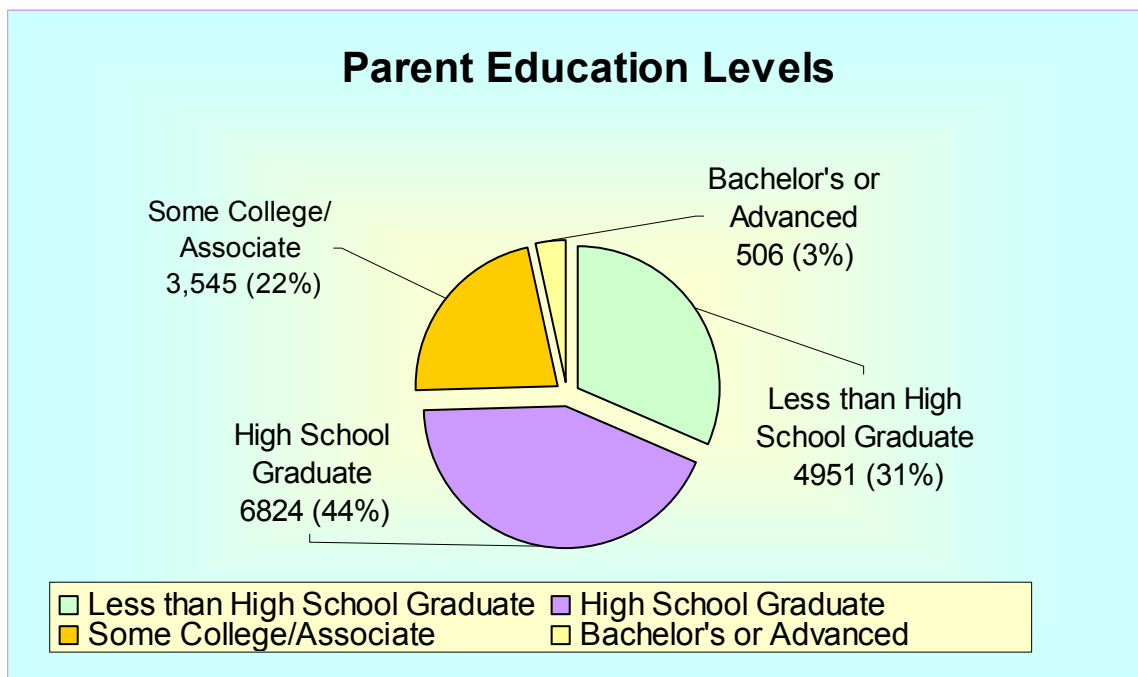
## **Family Partnerships – Major Federal Standards for Programs**

- Engage in a process of collaborative partnerships with individual families to develop a Family Partnership Agreement. The process includes establishing mutual trust; identifying family goals, strengths, and necessary services and supports; establishing the roles that staff and families will play in addressing the goals; and building upon, as appropriate, information obtained from the family and other community agencies concerning preexisting family plans and goals;
- Work collaboratively with participating parents to identify and access services and resources that are responsive to each family's interests and goals;
- Ensure parents are provided opportunities to enhance their own parenting skills, knowledge, and understanding of the educational and developmental needs and activities of their children, and to participate in medical, dental, nutrition, and mental health education programs;
- Ensure parents and children are provided opportunities to participate in family literacy services either directly or through referrals to other local agencies;
- Assist pregnant women in the Early Head Start program to access, through referrals, a system of prenatal and postpartum care; prenatal education including fetal development, labor and delivery, and postpartum care; and information on the benefits of breast-feeding;
- Assist parents in becoming their child's advocate with schools and other community agencies by providing a) a staff-parent meeting at the end of a child's enrollment to discuss the child's process; b) education and training to parents to prepare them to exercise their rights and responsibilities concerning their child's education; c) assisting parents to communicate with teachers.

**Federal or Other Assistance to Families** – Even though 347 more families were served in 2003-04 the number of TANF families decreased by 2% from the prior year. From 1999 through 2004, an average of 23% of families served received TANF. SSI family assistance for families increased 1% from 2002-03 to 8% in 2003-04

<b>Families on TANF 1998 – 2004</b>					
	1999-00	2000-01	2001-02	2002-03	2003-04
Total Families Served	13816	13939	14890	15479	15826
Receive TANF/AFDC	2783	3005	3157	4086	3844
% of Families Served	20%	22%	21%	26%	24%
Receive SSI	na	na	1127	1219	1324
% of Families Served	-	-	8%	7%	8%

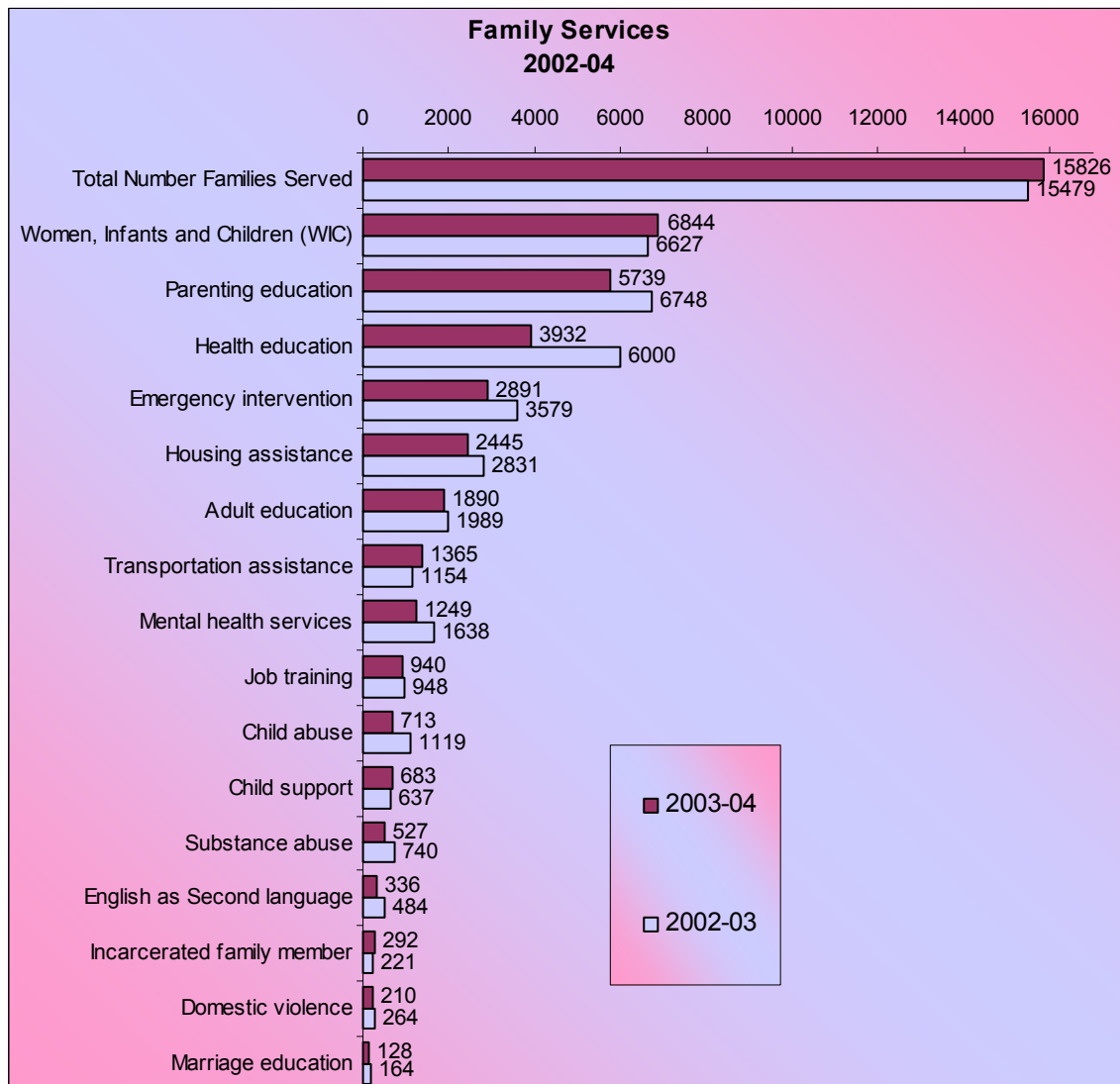
**Parent Education Level** – Of the 15,826 families served, 6,824 parents had a high school diploma or GED, 4,951 were not a high school graduate, 3,545 had some college or associate degree, and 506 had a Bachelor or advanced degree.



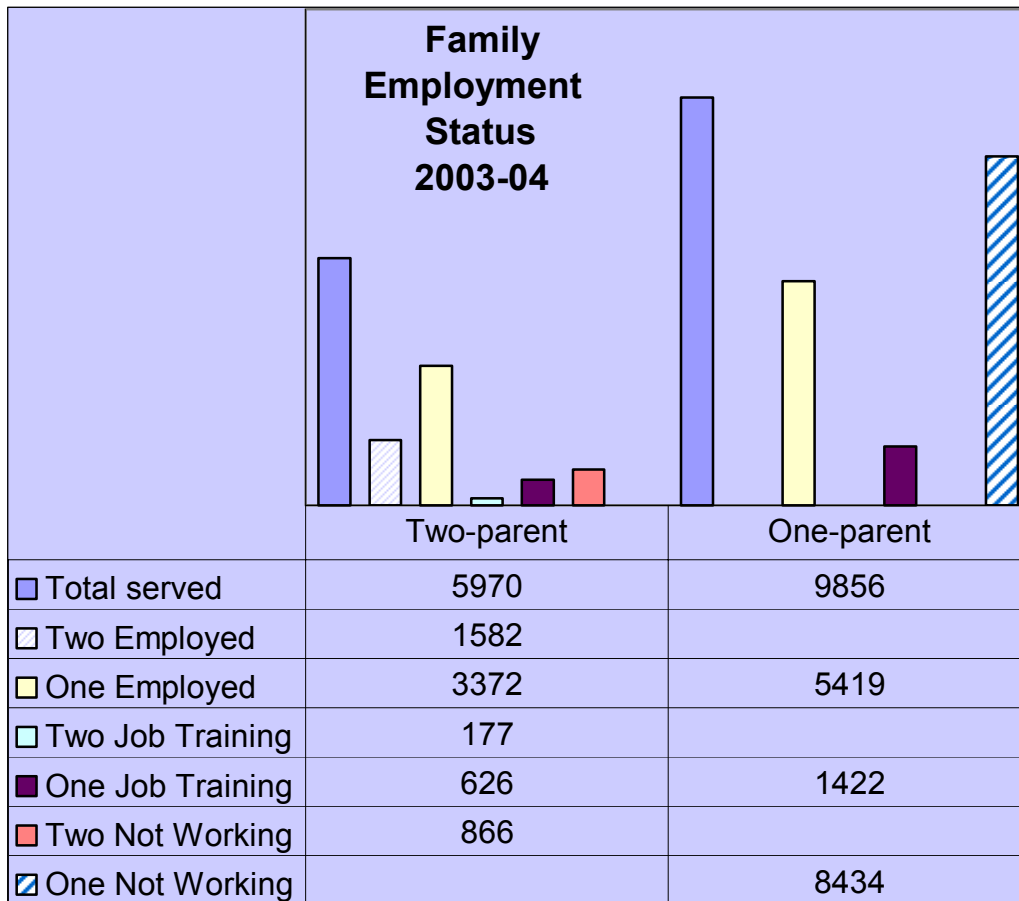
**Family Service Needs** - The family is the basis from which the child receives nourishment, encouragement, and acceptance. Head Start encourages family inter-action by supporting the family unit in numerous ways that involve job training, relationship building, and parenting education.

In 2003-2004, WIC was the main service received by 43% of the families and parenting education ranked second (36%). Health education decreased to 25% from last year. In comparing needs of 2003-04 to the prior year, emergency intervention decreased from 23% to 18%, housing and mental health decreased by 3% each. Transportation needs increased 2%.

Thirty-eight percent of the families requested and received program staff assistance in more than one benefit category; an 8% decrease from the prior year.



**Family Employment Status** – Of the total families served (15,826) one-parent families constituted 62% (63% during 2002-03) of families served and 38% were two-parent families. 51% of two-parent families had at least one person employed while 55% of one-parent families were employed. 27% of the two-parent families had both parents employed. In 17% of the two-parent families were both not working compared to 45% of the one-parent families. “Not working” was defined as a person unemployed, retired, and disabled.



The data shows an increase in the numbers of one- and two-parent families unemployed, retired, or disabled or not involved in job training or school.

**Parent Volunteerism – 17,268 current/former HS parents volunteered their services.** Parent volunteerism is an important element in Head Start programs.

Volunteers with Head Start/Early Head Start Programs				
2003-2004				
Program Name	City of Central Office	Total Volunteers	Current/ Former HS/EHS Parents	% Parent Volunteers
ICAP Head Start	New Castle	149	149	100%
Carey Services, Inc. EHS	Marion	247	242	98%
Marshall-Starke Development Center, Inc. EHS	Plymouth	82	80	98%
Vistula Head Start	Fremont	225	198	88%
Garrett-Keyser-Butler Early Head Start	Garrett	86	74	86%
Community Action Program, Inc. of Western Indiana EHS	Covington	108	86	80%
CDI Head Start (Elkhart & St. Joseph Counties, IN) HS	South Bend	631	502	80%
Lake Ridge Schools HS	Gary	61	48	79%
Geminus Corporation HS	Merrillville	1323	1039	79%
Community Action Program, Inc. of Western Indiana HS	Covington	883	690	78%
Community Action Program of Evansville EHS	Evansville	156	121	78%
Child-Adult Resource Services, Inc. EHS	Greencastle	61	47	77%
Marshall-Starke Development Center, Inc. HS	Plymouth	520	399	77%
Hamilton Center, Inc. EHS	Terre Haute	163	126	77%
Urban League of Madison County, Inc. HS	Anderson	328	239	73%
Hoosier Uplands E.D.C. EHS	Mitchell	118	86	73%
City of Hammond Schools HS	Hammond	624	438	70%
South Central Community Action Program HS	Bloomington	520	360	69%
Community Care In Union County, Inc. HS	Liberty	16	11	69%
Area IV Agency On Aging & Community Action Program HS	Frankfort	160	107	67%
Floyd County Community Action Agency HS	New Albany	150	100	67%
Hopewell Center, Inc. EHS	Anderson	254	165	65%
Community & Family Services, Inc. HS	Portland	568	369	65%
Head Start Action Inc. of Delaware County HS	Muncie	625	398	64%
Community Action of East Central Indiana HS	Richmond	536	342	64%
Kosciusko County EHS	Warsaw	14	9	64%
Dubois-Pike-Warrick EOC, DBA: Tri-Cap Head Start	Jasper	435	274	63%
Community And Family Resource Center, Inc. HS	Lafayette	474	300	63%
Wabash Valley Human Services, Inc. HS	Vincennes	781	490	63%
Human Services, Inc. HS	Columbus	801	498	62%
Family Development Services, Inc. HS	Indianapolis	6131	3776	62%
Hoosier Uplands E.D.C. HS	Mitchell	862	530	61%
Marion Community Schools Head Start	Marion	432	261	60%
Lincoln Hills Development Corporation HS	Tell City	672	395	59%
Fayette County School Corporation HS	Connersville	492	278	57%
Child-Adult Resource Services, Inc. HS	Greencastle	1088	608	56%
Kokomo-Center Schools HS	Kokomo	684	378	55%
Ohio Valley Opportunities, Inc. HS	Madison	702	372	53%
Community Action Program of Evansville HS	Evansville	1254	650	52%
Garrett-Keyser-Butler Head Start	Garrett	459	233	51%
East Wayne Head Start	Fort Wayne	403	190	47%
Kankakee-Iroquois Regional Planning Commission HS	Monon	521	239	46%
Community And Family Resource Center, Inc. EHS	Lafayette	95	42	44%
W.I.C.A.A. - Vigo County Head Start	Terre Haute	773	296	38%
Bona Vista Programs, Inc. EHS	Kokomo	116	42	36%
Southeastern Indiana Economic Opportunity Corp HS	Aurora	1491	502	34%
Wabash Valley Human Services, Inc. EHS	Vincennes	198	67	34%
Community Organization of Social Concerns HS	Michigan City	154	46	30%
Family Development Services, Inc. EHS	Indianapolis	210	53	25%
Area Five Agency On Aging And Community Services HS	Logansport	854	213	25%
Community Action of Northeast Indiana, Inc. HS	Fort Wayne	673	89	13%
Community Action of Southern Indiana HS	Jeffersonville	387	21	5%
Kosciusko County HS	Warsaw	0	0	0%
<b>Total</b>		<b>29750</b>	<b>17268</b>	<b>58%</b>

**Fatherhood Initiatives** - Programs have taken an aggressive stand to increase the number of children who grow up with active involvement of their fathers. Research has emphasized the important role fathers' involvement can play in the positive cognitive, emotional, and social development of their sons and daughters. Father involvement lessens the risk of a child being poor, dropping out of high school, being incarcerated in a juvenile facility, or becoming a teenage parent.

41 of the 53 reporting HS programs that acknowledged having regular activities to encourage father/father figure involvement. 2,165 children had a father or father figure involved in Head Start activities.

Fatherhood Programs in 2003-2004	
Program Name	Central Office
Urban League of Madison County, Inc.	Anderson
Southeastern Indiana Economic Opportunity Corp	Aurora
South Central Community Action Program	Bloomington
Human Services, Inc.	Columbus
Fayette County School Corporation	Connersville
Community Action Program of Evansville HS & EHS	Evansville
Community Action of Northeast Indiana, Inc. HS	Fort Wayne
East Wayne Head Start	Fort Wayne
Area IV Agency On Aging & Community Action Program HS	Frankfort
Garrett-Keyser-Butler HS & EHS	Garrett
Lake Ridge Schools HS	Gary
Child-Adult Resource Services, Inc. HS & EHS	Greencastle
City of Hammond Schools HS	Hammond
Family Development Services, Inc. HS & EHS	Indianapolis
Dubois-Pike-Warrick EOC, DBA: Tri-Cap Head Start	Jasper
Kokomo-Center Schools HS	Kokomo
Community And Family Resource Center, Inc. HS & EHS	Lafayette
Community Care In Union County, Inc. HS	Liberty
Area Five Agency On Aging And Community Services HS	Logansport
Ohio Valley Opportunities, Inc. HS	Madison
Marion Community Schools Head Start	Marion
Carey Services, Inc. EHS	Marion
Geminus Corporation HS	Merrillville
Community Organization of Social Concerns HS	Michigan City
Hoosier Uplands E.D.C. HS & EHS	Mitchell
Head Start Action Inc. of Delaware County	Muncie
Marshall-Starke Development Center, Inc. HS & EHS	Plymouth
Community Action of East Central Indiana HS	Richmond
Lincoln Hills Development Corporation HS	Tell City
W.I.C.A.A. - Vigo County HS	Terre Haute
Wabash Valley Human Services, Inc. HS & EHS	Vincennes
Kosciusko County HS & EHS	Warsaw

**Homeless Services by Grantee –** Head Start strives to ensure that homeless children receive services in a safe and nurturing environment.

<b>2003-2004 Homeless Served in Head Start/Early Head Start Programs</b>				
<b>City</b>	<b>Agency Name</b>	<b>Families</b>	<b>Children</b>	<b>Housing Acquired</b>
Monon	K-IRP HS	93	9	4
Mitchell	Hoosier Uplands E.D.C. HS	71	83	31
Greencastle	Child-Adult Resource Services, Inc. HS	47	58	23
Covington	Comm Action Program, Inc. of Western IN HS	33	33	10
Evansville	Community Action Program of Evansville HS	28	31	26
Indianapolis	Family Development Services, Inc. HS	27	28	17
Fort Wayne	Community Action of Northeast Indiana, Inc. HS	22	23	4
Merrillville	Geminus Corporation HS	18	20	10
Garrett	Garrett-Keyser-Butler HS	16	19	13
Logansport	Area Five Agency On Aging & Comm HS	12	13	6
Evansville	Community Action Program of Evansville EHS	11	15	10
Anderson	Hopewell Center, Inc. EHS	11	12	6
Covington	Comm Action Program, Inc. of Western IN EHS	10	10	2
Vincennes	Wabash Valley Human Services, Inc. HS	9	15	5
Kokomo	Bona Vista Programs, Inc. EHS	9	12	8
Jasper	Dubois-Pike-Warrick EOC, DBA: Tri-Cap HS	9	18	7
Garrett	Garrett-Keyser-Butler EHS	9	15	5
Marion	Marion Community Schools HS	8	7	3
Tell City	Lincoln Hills Development Corporation HS	7	6	1
Portland	Community & Family Services, Inc. HS	7	7	7
New Albany	Floyd County Community Action Agency HS	7	7	7
Kokomo	Kokomo-Center Schools HS	7	7	5
Columbus	Human Services, Inc. HS	7	8	7
Bloomington	South Central Community Action HS	6	7	6
Terre Haute	Hamilton Center, Inc. EHS	5	5	4
Connersville	Fayette County School Corporation HS	5	5	4
South Bend	CDI HS (Elkhart & St. Joseph Counties, IN)	4	4	4
Madison	Ohio Valley Opportunities, Inc. HS	3	8	3
Hammond	City of Hammond Schools HS	3	3	3
Frankfort	Area IV Agency On Aging & Comm Action HS	3	5	1
Vincennes	Wabash Valley Human Services, Inc. EHS	2	2	1
Muncie	HS Action Inc. of Delaware County	2	2	2
Mitchell	Hoosier Uplands E.D.C. EHS	2	3	1
Michigan City	Comm Organization of Social Concerns HS	2	4	2
Lafayette	Comm And Family Resource Center, Inc. EHS	2	4	2
Greencastle	Child-Adult Resource Services, Inc. EHS	2	5	0
Fort Wayne	East Wayne Head Start HS	2	2	2
Anderson	Urban League of Madison County, Inc. HS	2	2	2
Warsaw	Kosciusko County HS	1	1	0
Lafayette	Comm And Family Resource Center, Inc. HS	1	1	1
Jeffersonville	Community Action of Southern Indiana HS	1	1	1
Gary	Lake Ridge Schools HS	1	1	1
Aurora	SIEOC HS	1	3	0
Warsaw	Kosciusko County EHS	0	0	0
Terre Haute	W.I.C.A.A. - Vigo County HS	0	0	0
Richmond	Community Action of East Central Indiana HS	0	0	0
Plymouth	Marshall-Starke Development Center, Inc. HS	0	0	0
Plymouth	Marshall-Starke Development Center, Inc. EHS	0	0	0
New Castle	ICAP HS	0	0	0
Marion	Carey Services, Inc. EHS	0	0	0
Liberty	Community Care In Union County, Inc. HS	0	0	0
Indianapolis	Family Development Services, Inc. EHS	0	0	0
Fremont	Vistula Head Start HS	0	0	0
<b>Total</b>		<b>528</b>	<b>524</b>	<b>257</b>

## **Community Partnerships – Major Federal Standards for Programs**

- Take an active role in community planning and establish ongoing collaborative relationships with community organizations to promote the access of children and families to community services that are responsive to their needs
- Establish and maintain a Health Services Advisory Committee of professionals and volunteers from the community as deemed appropriate to respond to community needs
- Establish and maintain effective procedures to support successful transition for enrolled children and families.



# Section III

## **Program Design and Management**





### Human Resources Management – Federal Standard for Program

- Establish and maintain an organizational structure that adequately supports the program and assigns to staff the functions of program management, the management of early childhood development and health services, and the management of family and community partnership activities.
- Ensure staff and consultants have the knowledge, skills, and experience they need to perform their assigned functions. The director must have skills relevant to human services program management and content area experts must be staff or consultants with knowledge, skills, and experience relevant to their content areas. Infant-toddler and preschool teachers must meet specific education or certification requirements. Health staff that performs procedures, the manager of nutrition services, providers of certain mental health services, and the fiscal officer must meet required licensure.
- When a majority of children speak the same language, ensure that at least one classroom staff member with children speaks their language.
- Meet class size requirements for all age groups.
- Orient new staff to the program; perform annual performance reviews of all staff and use the results to identify training and professional development needs; implement a structured approach to staff training and development, attaching academic credit whenever possible; orient and train governing body and policy group members to enable them to carry out their responsibilities effectively.
- Assure that each staff member has an initial health examination that includes screening for tuberculosis and a periodic re-examination in accordance with State, Tribal, or local laws. Also assure that all regular volunteers are screened for tuberculosis in accordance with State, Tribal, or local laws, or as recommended by the Health Services Advisory Committee.

**Management Staff** - A total of 3,055 Head Start and Early Head Start staff and 124 contracted staff were responsible to get a child off to a good start for the rest of his/her life. Last year 717 staff members were former or current Head Start parents compared to 665 this year.

The management staff is responsible to coordinate a pleasant long lasting educational experience for children and families through leadership of the professional staff.

<b>Education and Experience of Management Staff 2003-04</b>				
	Number of Programs	Average Years in Position	Average Annual Salary	Average Educational Level
Executive Director	47	12	\$67,824.13	Baccalaureate
Program Director	51	8	\$50,719.59	Baccalaureate
Child Development and Education Manager	52	5	\$33,333.46	Baccalaureate
Health Services Manager	47	8	\$30,119.79	Associate
Family and Community Partnerships	51	6	\$30,742.27	Baccalaureate

**Child Development Staff –** During the 2003-2004 term, 683 teachers, 744 assistant teachers, 84 home visitors, 105 child development supervisors, and 20 home-based supervisors nurtured the HS/EHS children. The 1998 reauthorization of Head Start mandated that at least 50% of lead teachers in programs receive an associate degree. 70% of the teachers held advanced degrees in 2003-04.

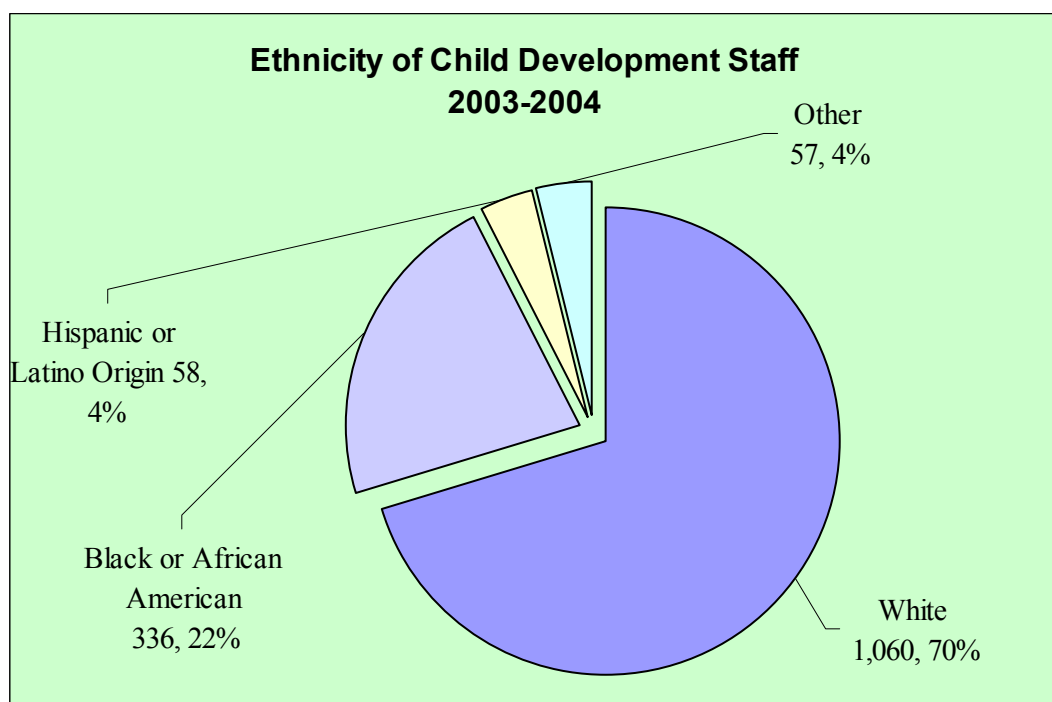
2003-2004 Child Development Staff Qualifications										
	Teachers		Assistant Teachers		Home Visitors		Child Development Supervisors		Home-Based	
Total Staff	683		744		84		105		20	
Associate (ECE)	239	35%	41	6%	4	5%	29	28%	4	20%
Baccalaureate ECE)	210	31%	24	3%	34	40%	38	36%	3	15%
Graduate (ECE)	27	4%	1	0%	3	4%	17	16%	6	30%
Child Development Associate credential or State equivalent (CDA)	148	22%	283	38%	14	17%	14	13%	3	15%
CDA in Degree Program	96	14%	72	10%	3	4%	9	9%	3	15%
Without CDA-In Degree Program	13	2%	78	10%	5	6%		0%		0%
Without CDA-In CDA Program	7	1%	70	9%	3	4%	1	1%		0%
Staff of Child Care Center Partnering with HS/EHS	17	2%	17	2%		0%		0%		0%

Average Annual Salary 2003-04			
Staff	Number of Programs	Average Salary	Hourly Rate
Teacher	47	\$21,643.70	\$13.41
w/ Associate	42	\$20,089.48	
w/ Baccalaureate	42	\$23,137.40	
w/ Graduate	15	\$28,106.00	
w/ CDA	29	\$17,554.93	
Assistant Teacher	46	\$14,039.30	\$8.67
Home Based	20	\$22,733.30	\$12.24

**Teacher Turnover** – Indiana teacher turnover was 17% compared to 14% in Region 5. 118 teachers left Head Start; the majority leaving for reasons unknown.

Teacher Turnover 2003-04		
Reason for Leaving	Number of Staff	% of Staff Turnover
Higher Compensation	19	16%
Career Change	15	13%
Other Reasons	84	71%
Teachers Who Left Program	118	100%

**Ethnicity** – The Child Development staff of 1,511 were of the following ethnic groupings with 206 are proficient in a language other than English.



## Family and Community Partnerships and Supervisory Staff –

During the 2003-2004 term 283 family workers and 63 family and community partnership supervisors coordinated efforts to effectively work with families and community providers. The majority of family workers (137) had one to five years experience on the job, 65 have six to ten years, and 43 have more than ten years.

A chart showing the breakdown of educational degrees and work experience of the staff is below.

2003-2004 Family and Community Partnerships and Supervisory Qualifications				
	Family Workers		Supervisors	
Total Staff	283		63	
GED or Diploma	118	42%	16	25%
Associate (ECE)	41	14%	10	16%
Baccalaureate ECE)	111	39%	25	40%
Graduate (ECE)	11	4%	8	13%
No Degree/In Training	40	14%	8	13%

## **Program Governance – Major Federal Standards for Programs**

- Establish and maintain a formal structure of shared governance through which parents can participate in policy making or other decisions about the program, including a Policy Council at the grantee level, one or more Policy Committees at the delegate level, and Parent Committees at the center level for center-based programs and equivalent level for non-center-based options.
- Implement written policies that define roles and responsibilities of the governing body and establish appropriate internal controls to safeguard Federal funds.
- Establish written procedures for resolving internal disputes.
- Require governing bodies to propose the total size of their policy groups, the procedures for the election of parent members, and the procedures for the selection of community representatives. Policy Council and Policy Committees must have a membership of at least 51 percent parents of currently enrolled children. All parent members are elected annually while community representatives are appointed/selected annually. No member may serve more than three one-year terms; and no grantee or delegate agency staff (or their immediate families) may serve on Policy Councils or Committees.
- Ensure Policy Councils work with management staff and the governing body to develop, review, and approve or disapprove all funding applications and amendments, share decision-making about procedures for program planning, long and short-range goals and objectives, the selection of delegate agencies and their service areas. They focus on the composition of the policy groups and selection procedures, criteria for recruitment, selection and enrollment of children, the annual self-assessment, personnel policies, and decisions to hire or terminate the Program's director. Councils participate in hiring/termination decisions, assist Parent Committees in such areas as planning, coordinating, and organizing parent focused activities.
- Use of Parent Committee(s) to advise staff in developing and implementing policies, activities, and service plan, conduct, and participate in programs and activities for parents and staff.



## **Management Systems and Procedure-- Major Federal Standards for Programs**

- Develop and implement a systematic, ongoing process of program planning that includes an assessment of community strengths, needs, and resources; development of long- and short-range goals and objectives; and written plans for implementing services in all program areas.
- Establish and implement communication systems among staff, with families governing bodies, policy groups, and delegate agencies.
- Establish and maintain efficient, effective confidential record-keeping and reporting systems which provide accurate and timely information regarding children, families, and staff.
- Conduct annual self-assessment of the program's effectiveness and progress in meeting its goals and in implementing Federal regulations.

## **Facilities, Materials, and Equipment – Major Federal Standards for Programs**

- Provide physical environment that is conducive to learning and reflective of the different stages of development of children;
- Provide for the maintenance, repair, safety, and security of all Head Start facilities, materials, and equipment.
- Maintain an environment free of toxins including: cigarette smoke, pesticides, herbicides, other air pollutants, and soil and water contaminants.
- Conduct an annual safety inspection to ensure that each facility's space, light, ventilation, heat, and other physical arrangements are consistent with the health, safety, and developmental needs of children.
- Provide and arrange sufficient equipment, toys, materials, and furniture to meet the needs and facilitate the participation of adults and children.



# Section IV

## Appendix





**GLOSSARY**

ACF-----	Administration for Children, and Families – part of the Department of Health and Human Services.
CAA-----	Community Action Agency – an organization either public or private non-profit which is funded by the Community Service Block Grant to administer and coordinate on a community-wide basis, a variety of antipoverty programs which often includes Head Start. Also known as CAP.
CDA-----	Child Development Associate – education credential awarded to early childhood educators by The Council for Early Childhood Professional Recognition.
Center based program option----	Head Start services provided in classroom settings rather than in homes
Children with disabilities-----	For children ages birth to 5, those with mental disability, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury or other health impairments, specific learning disabilities, deaf-blindness, or multiple disabilities, and who, by reason thereof, need special education and related services.
Combination program option---	Head Start services provided to children in both a center setting and through intensive work with the child's parents and family at home.
Delegate agency-----	A public or private non-profit organization or agency subcontracted by a grantee and designated to operate a Head Start program, in accordance with Part 1302 of Head Start regulations.
Enrollment-----	The official acceptance of a family by a Head Start program and the completion of all procedures necessary for a child and family to begin receiving services.
Grantee-----	Organization which contracts with U.S. Department of Health and Human Services and is responsible for monitoring fiscal and program standards.

Head Start Agency or ‘grantee’-	A local public or private non-profit agency designated to operate a Head Start program by the responsible Health and Human Services official, in accordance with part 1302 of Head Start regulations.
Home visitor-----	The staff member in the home-based program option assigned to work with the parents to provide comprehensive services to children and their families through home visits and group socialization.
Home visits-----	The visits made to a child’s home by the class teacher in a center-based program option, or home visitors in a home-based program option, for the purpose of assisting parents in fostering the growth and development of their child.
Home based program option----	Head Start services provided to children in the child’s home, through intensive work with the child’s parents and family as the primary factor in the growth and development of the child.
Local Design-----	Option created by the local Head Start program to meet the needs of the families and based on a community needs assessment.
PIR-----	Program Information Report – the form that provides quantitative information on key components of each Head Start program to Administration for Children and Families; it is completed between June and August of each year.
Service area-----	The geographic area identified in an approved grant application within which a grantee may provide Head Start services.
Teacher-----	An adult who has direct responsibility for the care and development of children from birth to 5 years of age in a center-based setting.

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608 Tennessee Street  
Greencastle, IN 46135  
(Grantee: CARS, Inc.)

Counties: Clay - 12, Owen- 12, Putnam- 12  
765-653-2454 ext. 508  
1-800-220-8330 (toll free)  
765-653-9074 fax  
E-mail: [dpoteet@cars-services.org](mailto:dpoteet@cars-services.org)  
TFE: 36

### INDIANAPOLIS

Diane Taylor, Director  
Family Development Services, Inc.  
Early Head Start  
3637 N. Meridian Street  
Indianapolis, IN 46208  
(Grantee: Family Development Services)

County: Marion  
317-803-3840  
317-803-9487 fax  
E-mail: [dtaylor@fds.org](mailto:dtaylor@fds.org) [www.fds.org](http://www.fds.org)  
TFE: 56 + 10 pregnant Moms

## Indiana EARLY HEAD START Directory

### KOKOMO

Carol L. Morrison, Director  
Early Head Start  
Bona Vista Programs, Inc.  
1220 E. Laguna  
P. O. Box 2496  
Kokomo, IN 46904-2496

Counties: Howard- 64, Miami- 16  
765-457-8273  
Miami County 765-473-6744  
765-454-5346 fax  
E-mail: [ehsdirector@bonavista.org](mailto:ehsdirector@bonavista.org)  
TFE: 80

### LAFAYETTE

Anita Fisher, EHS Coordinator  
Community & Family Resource Center  
Early Head Start  
330 Fountain Street  
P. O. Box 1186  
Lafayette, IN 47902-1186

County: Tippecanoe  
765-449-0487  
765-448-3698  
E-mail: [afisher@cfrc.org](mailto:afisher@cfrc.org)  
TFE: 47 + 10 preg. Moms

### MARION

Kim Hollies, Director  
Early Head Start  
Carey Services, Inc.  
2724 South Carey Street  
Marion, IN 46953

Counties: Grant- 102, Blackford- 38  
765-668-8961  
888-668-8961 (toll free)  
765-664-6747 fax  
E-mail: [khollies@careyservices.com](mailto:khollies@careyservices.com)  
TFE: 120

### MITCHELL

Debbie Beeler, Director of Children's Services  
Hoosier Uplands EDC Early Head Start  
521 W. Main Street  
Mitchell, IN 47446

Counties: Lawrence- 30,  
Martin- 4, Orange- 10, Washington- 10  
812-849-4447  
800-827-2219 (toll free)  
812-849-0627 fax  
E-mail: [dbeeler@tima.com](mailto:dbeeler@tima.com)  
TFE: 54

### PLYMOUTH

Pat Langfeldt, Supervisor  
Marshall-Starke Development Center, Inc.  
Early Head Start  
1901 PIDCO Drive  
Plymouth, IN 46563  
(Grantee: Marshall Starke Development)

Counties: Marshall- 20, Starke- 20  
574-935-5468  
800-720-7745 (toll free)  
574-935-9499 fax  
E-mail: [patl@dnsonline.net](mailto:patl@dnsonline.net)  
TFE: 40

### TERRE HAUTE

Anita Lascelles, Director  
Early Head Start  
Hamilton Center  
620 8<sup>th</sup> Ave., P. O. Box 4323  
Terre Haute, IN 47804-0323

County: Vigo  
812-231-8436  
812-231-8166 fax  
E-mail: [alascelles@hamiltoncenter.org](mailto:alascelles@hamiltoncenter.org)  
TFE: 80

## **Indiana EARLY HEAD START Directory**

### **TEXAS MIGRANT COUNCIL**

Louis Guardiola, Regional Director  
Michelle Jansen, Northern Region Lead Coordinator -  
Indiana Office  
Indiana Migrant Head Start  
513 W. Lincoln  
Kokomo, IN 46902

Counties: Adams, Howard, Knox, Madison, Marion,  
Noble, St. Joseph, Tippecanoe  
765-453-1509 800-862-4767 765-453-1809 fax  
E-mail: [louis.guardiola@mail.tmccentral.org](mailto:louis.guardiola@mail.tmccentral.org)  
[michelle.jansen@mail.tmccentral.org](mailto:michelle.jansen@mail.tmccentral.org)

### **VINCENNES**

Melanie Flory, Early Head Start Specialist  
Wabash Valley Human Services  
525 N. 4<sup>th</sup> Street  
P. O. Box 687  
Vincennes, IN 47591-0687 Counties: Daviess- 80,  
Greene- 83,  
Knox- 19 + 11 pregnant Moms,  
Sullivan- 14 + 5 pregnant Moms  
812-882-7927  
812-882-1436 fax  
E-mail: [wvhsmlflory@yahoo.com](mailto:wvhsmlflory@yahoo.com)  
TFE: 49

### **WARSAW**

Carol Droke, Director  
Kosciusko County Early Head Start  
811 S. Buffalo  
Warsaw, IN 46580  
(Grantee: Cardinal Center, Inc.)

County: Kosciusko  
574-267-2451 ext. 334  
800-315-2308 (toll free)  
574-267-1998 fax  
E-mail: [carold@cardinalcenter.org](mailto:carold@cardinalcenter.org)  
TFE: 40

Alphabetical by County

COUNTY	City	COUNTY	City
Adams	Portland	Lawrence	Mitchell
Allen	Fort Wayne	Madison	Anderson
Bartholomew	Columbus	Marion	Indianapolis
Benton	Covington	Marshall	Plymouth
Blackford	Portland/Marion	Martin	Mitchell
Boone	Covington	Miami	Kokomo
Brown	Columbus	Monroe	Bloomington
Carroll	Frankfort	Montgomery	Covington
Cass	Logansport	Morgan	Greencastle
Clark	Jeffersonville	Newton	Monon
Clay	Greencastle	Noble	Fort Wayne
Clinton	Frankfort	Ohio	Aurora
Crawford	Tell City	Orange	Mitchell
Daviess	Vincennes	Owen	Greencastle
Dearborn	Aurora	Parke	Covington
Decatur	Columbus	Perry	Tell City
DeKalb	Garrett	Pike	Jasper
Delaware	Muncie	Porter	Merrillville
Dubois	Jasper	Posey	Evansville
Elkhart	South Bend	Pulaski	Monon
Fayette	Connersville	Putnam	Greencastle
Floyd	New Albany	Randolph	Portland
Fountain	Covington	Ripley	Aurora
Franklin	Aurora	Rush	New Castle
Fulton	Logansport	St. Joseph	South Bend
Gibson	Evansville	Scott	Madison
Grant	Marion	Shelby	Columbus
Greene	Vincennes	Spencer	Tell City
Hamilton	Indianapolis	Starke	Plymouth
Hancock	New Castle	Steuben	Freemont
Harrison	Tell City	Sullivan	Vincennes
Hendricks	Greencastle	Switzerland	Aurora
Henry	New Castle	Tippecanoe	Lafayette
Howard	Kokomo	Tipton	Kokomo
Huntington	Portland	Union	Liberty
Jackson	Columbus	Vanderburgh	Evansville
Jasper	Monon	Vermillion	Covington
Jay	Portland	Vigo	Terre Haute
Jefferson	Madison	Wabash	Logansport
Jennings	Madison	Warren	Covington
Johnson	Columbus	Warrick	Jasper
Knox	Vincennes	Washington	Mitchell
Kosciusko	Warsaw	Wayne	Richmond
LaGrange	Freemont	Wells	Portland
Lake	Gary, Hammond, Merrillville	White	Frankfort
La Porte	Michigan City	Whitley	Fort Wayne



Alphabetical by City

County	CITY	County	CITY
Madison	Anderson	Miami	Kokomo
Dearborn	Aurora	Tipton	Kokomo
Franklin	Aurora	Tippecanoe	Lafayette
Ohio	Aurora	Union	Liberty
La Porte	Aurora	Cass	Logansport
Switzerland	Aurora	Fulton	Logansport
Monroe	Bloomington	Wabash	Logansport
Bartholomew	Columbus	Jefferson	Madison
Brown	Columbus	Jennings	Madison
Decatur	Columbus	Scott	Madison
Jackson	Columbus	Grant	Marion
Johnson	Columbus	Blackford	Marion
Shelby	Columbus	La Porte	Michigan City
Fayette	Connersville	Lawrence	Mitchell
Benton	Covington	Martin	Mitchell
Boone	Covington	Orange	Mitchell
Fountain	Covington	Washington	Mitchell
Montgomery	Covington	Jasper	Monon
Parke	Covington	Newton	Monon
Vermillion	Covington	Pulaski	Monon
Warren	Covington	Delaware	Muncie
Gibson	Evansville	Floyd	New Albany
Posey	Evansville	Hancock	New Castle
Vanderburgh	Evansville	Henry	New Castle
Allen	Fort Wayne	Rush	New Castle
Noble	Fort Wayne	Marshall	Plymouth
Whitley	Fort Wayne	Starke	Plymouth
Carroll	Frankfort	Adams	Portland
Clinton	Frankfort	Blackford	Portland
White	Frankfort	Huntington	Portland
LaGrange	Freemont	Jay	Portland
Steuben	Freemont	Randolph	Portland
De Kalb	Garrett	Wells	Portland
Lake	Gary	Wayne	Richmond
Hendricks	Greencastle	Elkhart	South Bend
Morgan	Greencastle	St. Joseph	South Bend
Owen	Greencastle	Crawford	Tell City
Putnam	Greencastle	Harrison	Tell City
Lake	Hammond	Perry	Tell City
Hamilton	Indianapolis	Spencer	Tell City
Marion	Indianapolis	Vigo	Terre Haute
Dubois	Jasper	Daviess	Vincennes
Pike	Jasper	Greene	Vincennes
Warrick	Jasper	Knox	Vincennes
Clark	Jeffersonville	Sullivan	Vincennes
Howard	Kokomo	Kosciusko	Warsaw

